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# (12) United States Patent

## Zudaire et al.

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## (54) ANTIANGIOGENIC SMALL MOLECULES AND METHODS OF USE

(75) Inventors: Enrique Zudaire, Germantown, MD (US); Marta Aparicio, Rockville, MD (US); Frank Cuttitta, Adamstown, MD

(US)

(73) Assignee: The United States of America, as represented by the Secretary,
Department of Health and Human Services, Washington, DC (US)

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U.S.C. 154(b) by 31 days.

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§ 371 (c)(1),

(2), (4) Date: Jan. 30, 2012

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PCT Pub. Date: Feb. 3, 2011

# (65) Prior Publication Data

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	A61K 38/12	(2006.01)
	A61K 31/63	(2006.01)
	A61K 31/135	(2006.01)
	A61K 31/4015	(2006.01)
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	A61K 31/285	(2006.01)
	A61K 31/555	(2006.01)

(52) U.S. Cl.

(58) Field of Classification Search

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Primary Examiner — Johann R Richter Assistant Examiner — Yanzhi Zhang

(74) Attorney, Agent, or Firm — Klarquist Sparkman, LLP

# 57) ABSTRACT

Methods of inhibiting undesired angiogenesis are provided, which methods include administering to a subject a therapeutically effective amount of at least one of the compounds described herein, or a pharmaceutically acceptable salt thereof.

# 4 Claims, 27 Drawing Sheets

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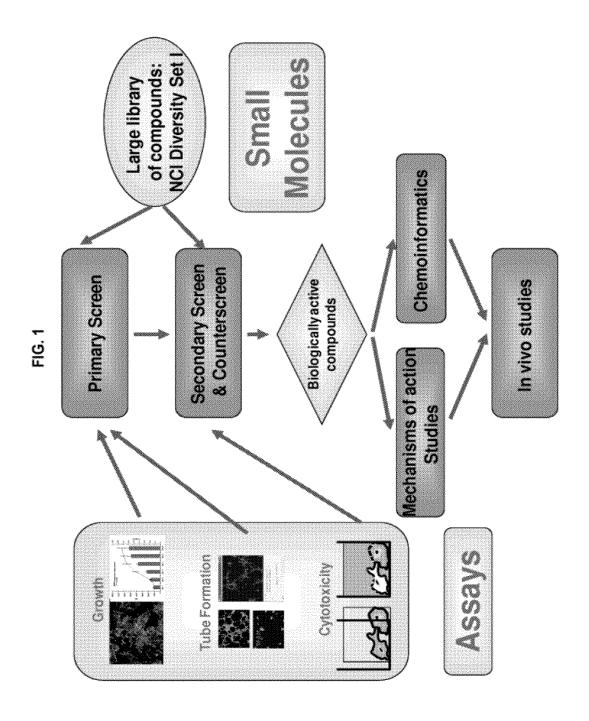
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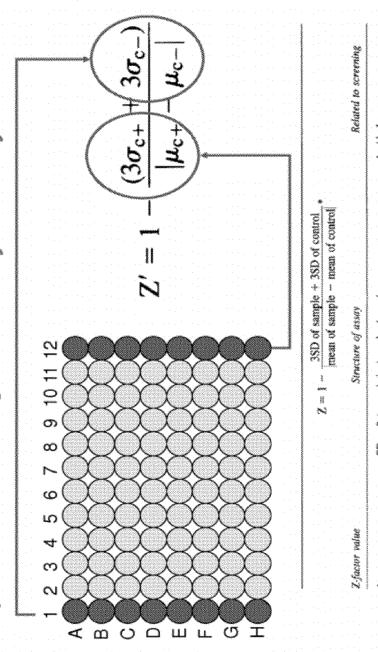
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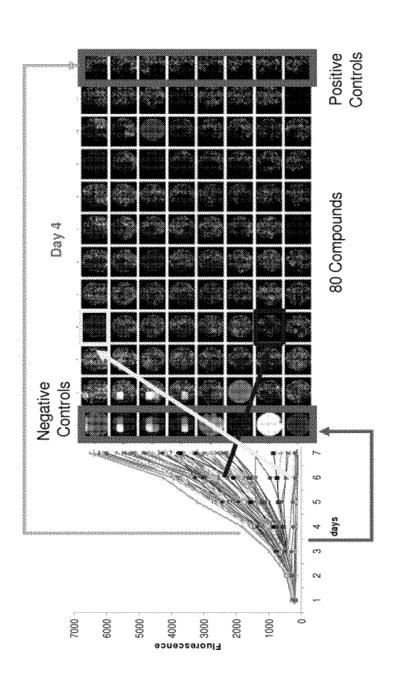


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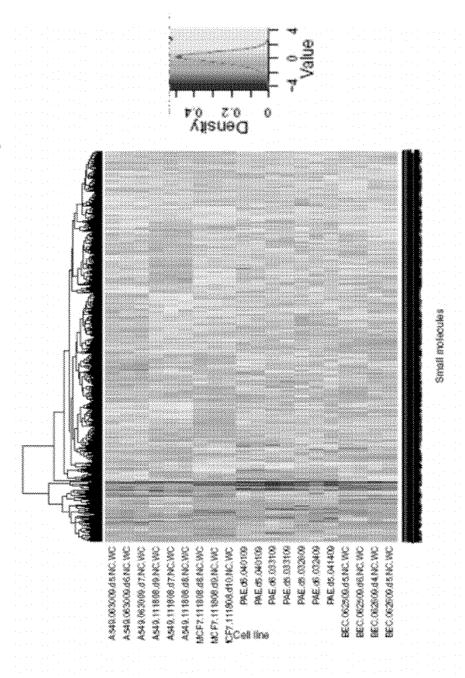
Related to screening	An ideal assay An excellent assay	A design lists of the assets	Screening essentially impossible	
SILUCIARE (J. 4884).	SD = 0 (no variation), or the dynamic range → ∞ A Separation band is large		control signal variation bands touch No separation band, the sample signal variation and	
Chector value and a second			7	

Growth Assay An example: 4143-11

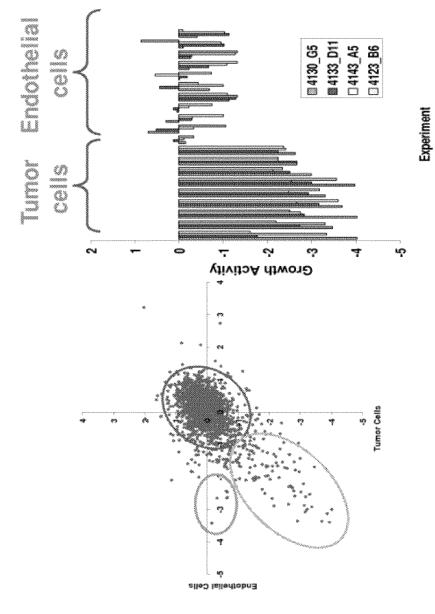


Growth HTS summary

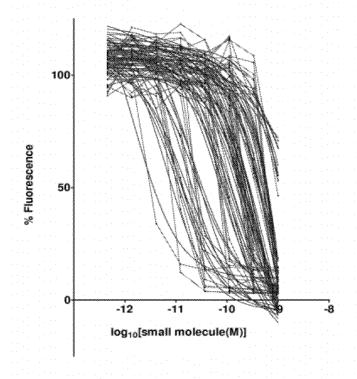
FIG. 4



Comparison of growth inhibitory activity in endothelial cells versus tumor cells

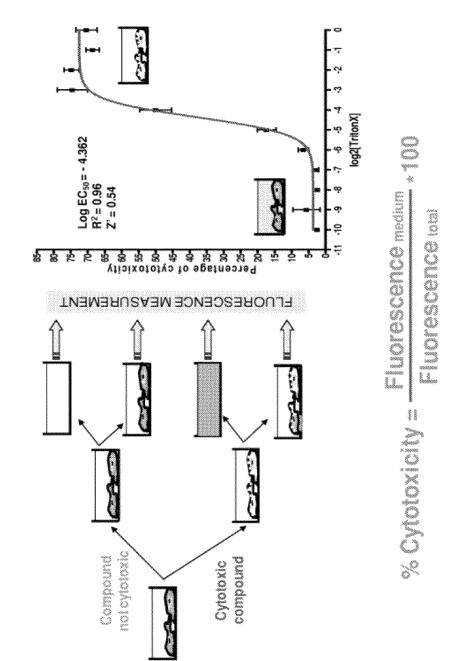


Half maximal inhibitory concentration (IC50) in PAE



New Cytotoxicity Assay

FIG. 7



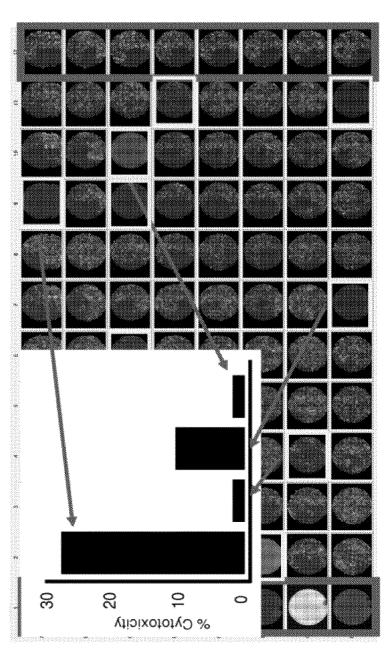
Nov. 17, 2015

FIG. 8

Hits in 4143-11

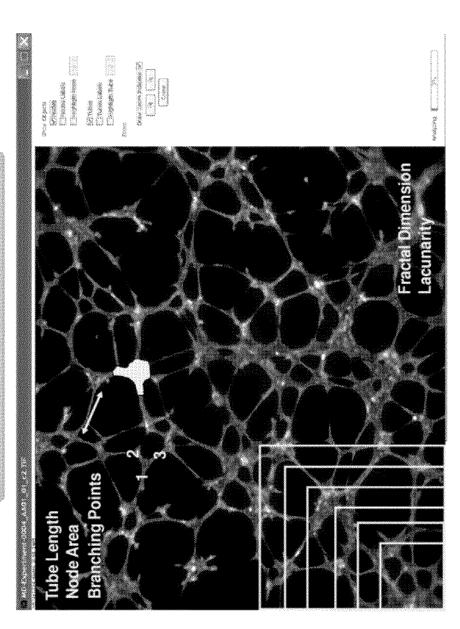
Positive Controls

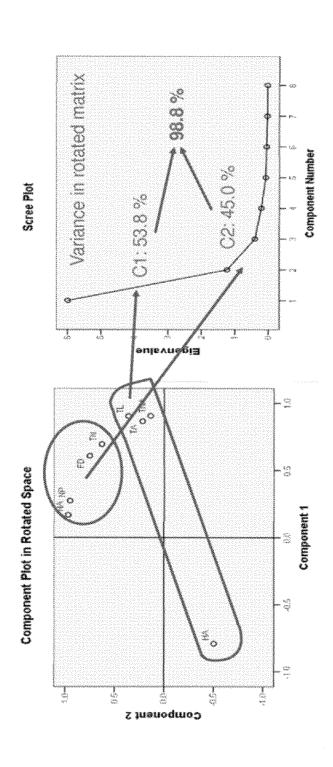
Negative Controls



80 Compounds

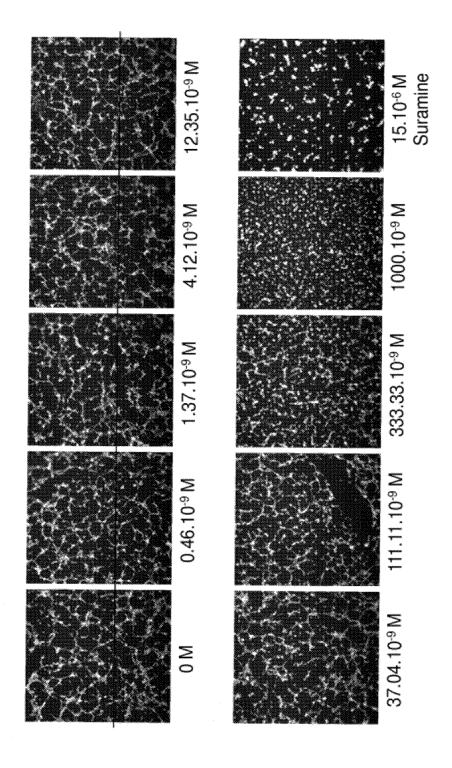
AngioApplication



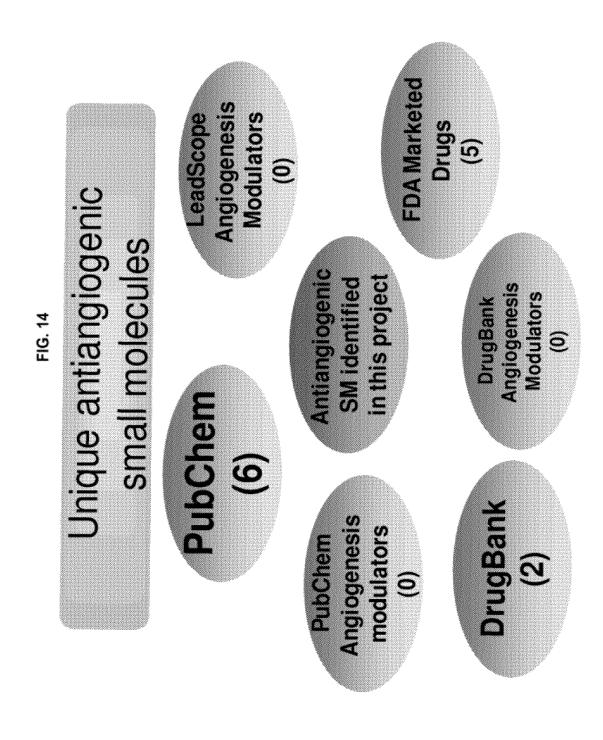


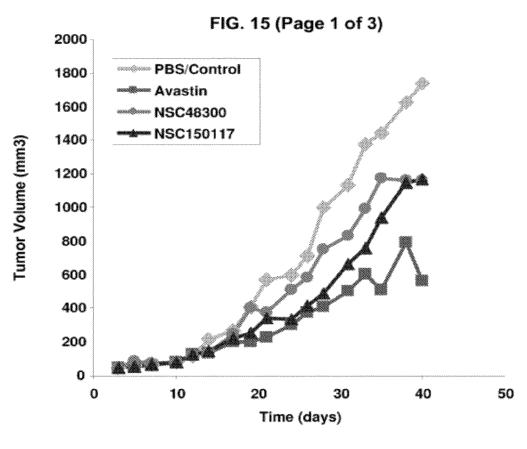
1000001 Average Positive ■ Negative Control Positive Control Compounds 168 8 CS

FIG. 12



UDE formation Antiangiogenic small molecule % % % Growth + Tube formation signature 8 % 6.0 \ \ \ \





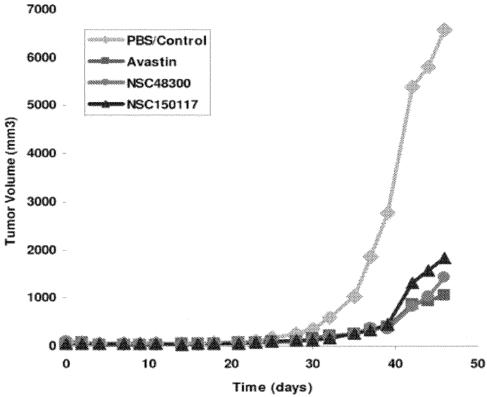
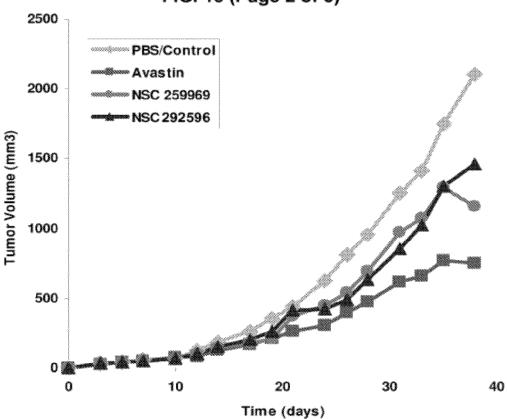


FIG. 15 (Page 2 of 3)

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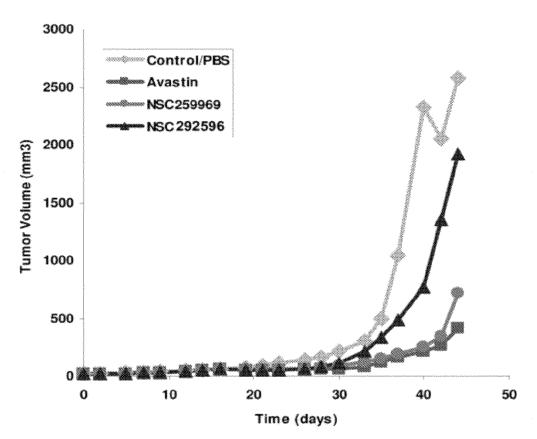
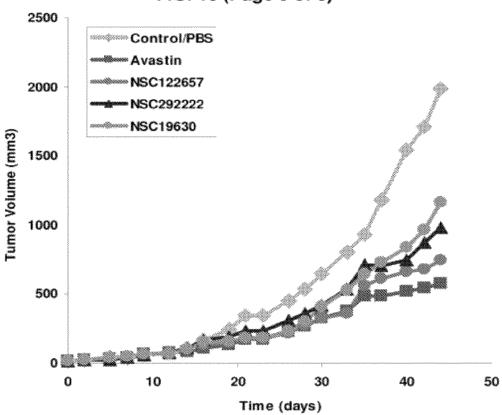


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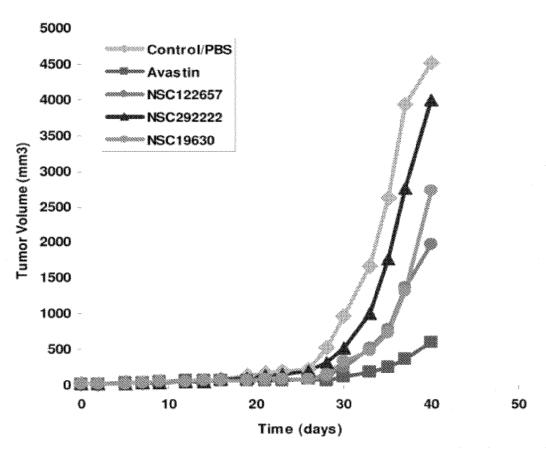
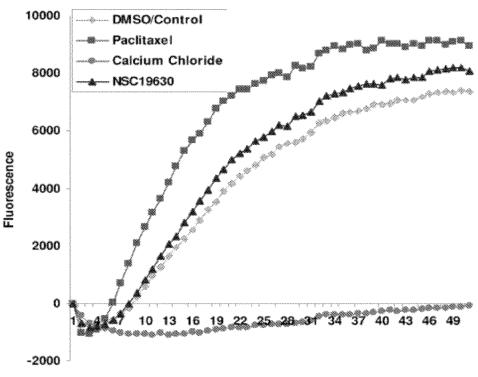
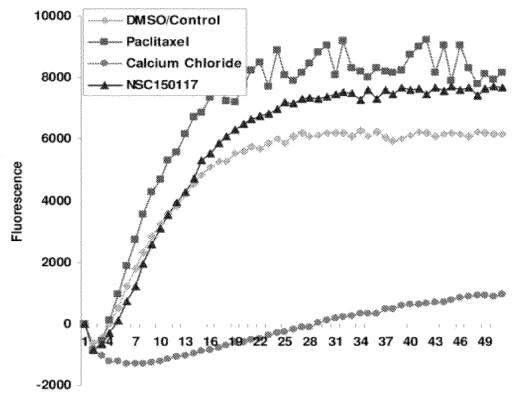


FIG. 16 (Page 1 of 4)

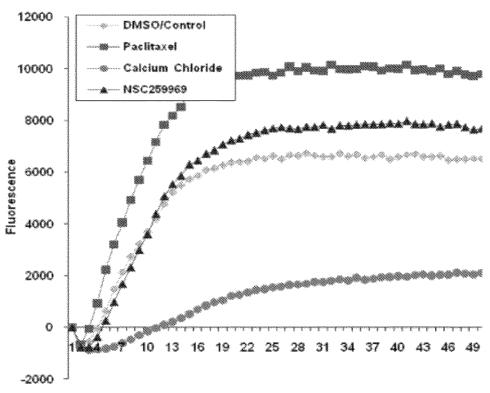


Time (min)

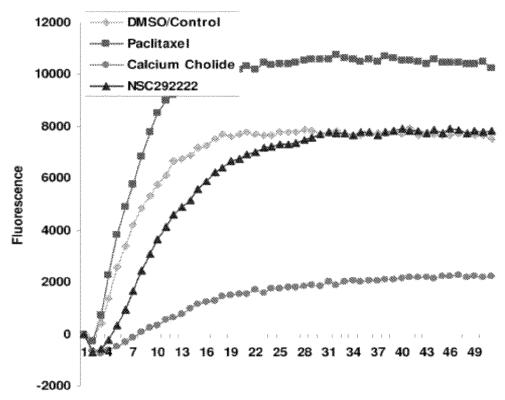


Time (min)

FIG. 16 (Page 2 of 4)

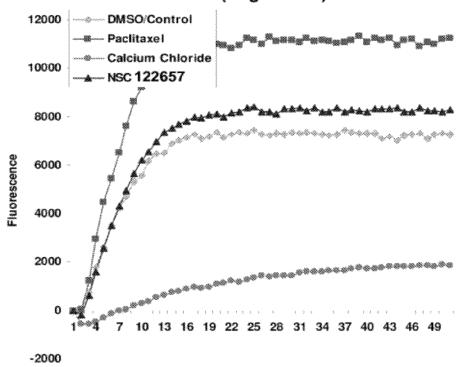


Time (min)

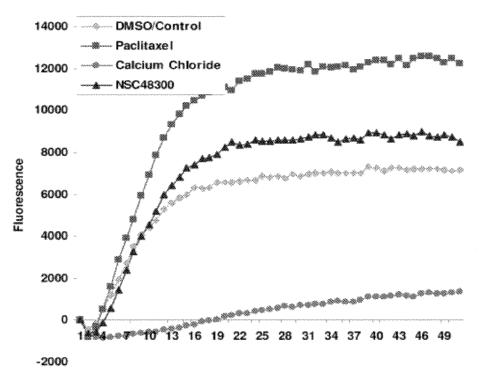


Time (min)

FIG. 16 (Page 3 of 4)



Time (min)



Time (min)

FIG. 16 (Page 4 of 4)

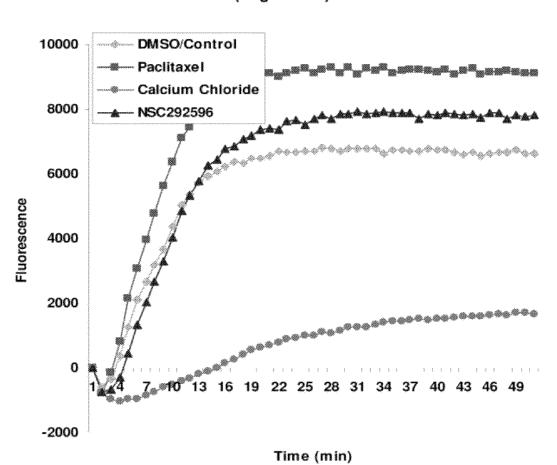


FIG. 17 (Page 1 of 6)

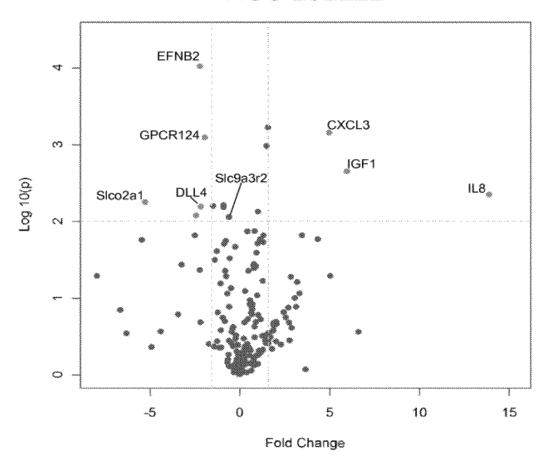


FIG. 17 (Page 2 of 6)

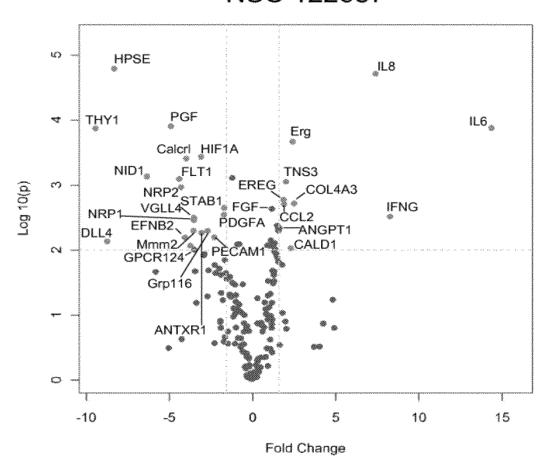


FIG. 17 (Page 3 of 6)

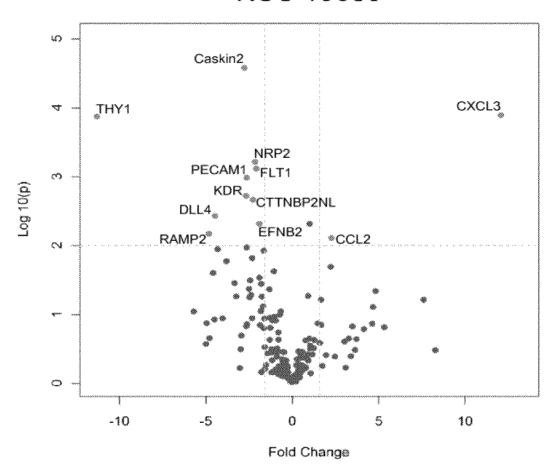


FIG. 17 (Page 4 of 6)

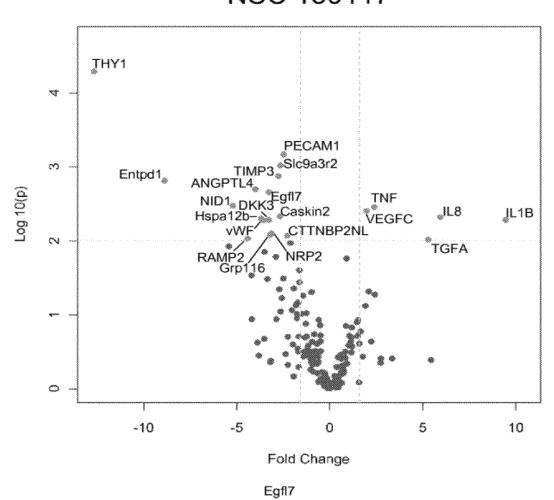


FIG. 17 (Page 5 of 6)

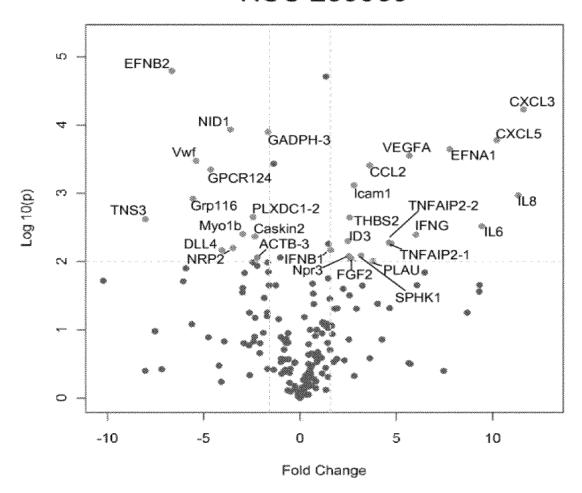
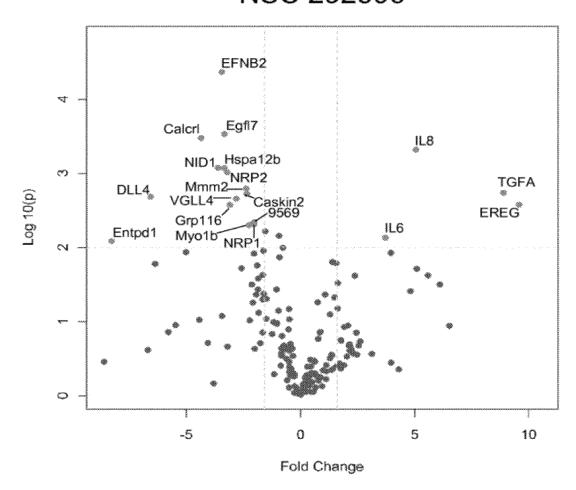


FIG. 17 (Page 6 of 6)



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# ANTIANGIOGENIC SMALL MOLECULES AND METHODS OF USE

# CROSS REFERENCE TO RELATED APPLICATION

This is the U.S. National Stage of International Application No. PCT/US2010/043998, filed Jul. 30, 2010, which was published in English under PCT Article 21(2), which in turn claims the benefit of U.S. Provisional Application No. 10 61/230,667, filed Jul. 31, 2009, which is incorporated herein by reference in its entirety.

### FIELD OF THE DISCLOSURE

The present disclosure relates to antiangiogenic compounds, derivatives thereof, and methods of use of such compounds and derivatives.

### BACKGROUND

Angiogenesis is the process of formation of new blood vessels from existing ones. Angiogenesis is a normal and vital process in growth and development, as well as in pathological conditions. Angiogenesis has been intensively studied over 25 the past several decades because of its fundamental importance in tissue development, vascular diseases, and cancer. Under normal physiological conditions, humans or animals undergo angiogenesis only in very specific restricted situations. For example, angiogenesis is normally observed in fetal 30 and embryonal development and formation of the corpus luteum. Post-natal angiogenesis is an important physiological function in the ovary, endometrium, placenta, and in wound healing. Deregulation of angiogenesis plays a major role in many human diseases including diabetic retinopathy, age- 35 related macular degeneration, endometriosis, atherogenesis, arthritis, psoriasis, corneal neovascularization, rheumatoid arthritis, tumorigenesis, and metastasis, among others.

Tumor angiogenesis involves the proliferation of a network of blood vessels that penetrates into cancerous growths, supplying nutrients and oxygen and removing waste products. Angiogenesis is also an element of metastasis of a tumor. Single cancer cells can break away from an established solid tumor, enter the blood vessel, and be carried to a distant site, where they can implant and begin the growth of a secondary 45 tumor. It has even been suggested that the blood vessels in a solid tumor may in fact be mosaic vessels, comprised of both endothelial cells and tumor cells. Such mosaicity allows for substantial shedding of tumor cells into the vasculature.

It has been shown that there is a direct correlation between 50 tumor microvessel density and the incidence of metastasis. Tumor cells themselves can produce factors that stimulate the proliferation of endothelial cells and new capillary growth. Angiogenesis is important in two stages of tumor metastasis: in vascularization of the tumor, which allows tumor cells to 55 enter the blood stream and to circulate throughout the body; and after the tumor cells have left the primary site and settled into the secondary (metastasis) site, angiogenesis must occur before the new tumor can grow and expand. Therefore, prevention of angiogenesis could lead to the prevention of 60 metastasis of tumors and possibly contain the neoplastic growth at the primary site.

Blockage of angiogenesis is recognized as one of the most promising strategies against cancer (including metastases), retinopathy and endometriosis, among other diseases. A significant increase in the research effort in the angiogenesis field over the past decade has resulted in a substantial

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increased understanding of the angiogenic process and subsequently the development of new therapeutics to modulate angiogenesis. Because of their extended biological half-life, high diffusibility coefficient and cost effective synthesis nonpeptidic antiangiogenic small molecules (SMs) are the main focus of pharmaceutical companies and academic institutions.

Angiogenesis-based anti-tumor therapies typically use natural and synthetic angiogenesis inhibitors such as angiostatin, endostatin and tumstatin. Recently the Food and Drug Administration (FDA) approved an antibody therapy targeting angiogenesis in colorectal cancer. This therapy is based on a monoclonal antibody directed against an isoform of VEGF and is marketed under the trade name Avastin®. The pharmaceutical industry has focused in the development tyrosine kinase inhibitors and tubulin binders as antiangiogenic small molecules. Thus, a need exists for small molecules which exploit other angiogenesis pathways.

### SUMMARY OF THE DISCLOSURE

The present disclosure relates to the identification of a new set of antiangiogenic small molecule inhibitors. Cell-based high throughput screenings (HTS) together with chemo-informatic tools were applied to the discovery of antiangiogenic small molecules. Rather than targeting the HTS to a single subcellular molecule, the screen described herein targeted the entire cellular process of angiogenesis. In particular, two cell based assays were employed, which represent the two most important steps in angiogenesis: endothelial cell growth and tube formation.

As a result, a new set of antiangiogenic small molecules (SMs) have been discovered. Structure-activity-relationship (SAR) studies have shown that the majority of the newly identified bioactive SMs are not related to previously recognized antiangiogenic SMs, based on comparisons to various databases (e.g., FDA marketed compounds; SMs currently in clinical trials compounds; and SMs annotated as antiangiogenic in chemical databases compounds, PubChem, Lead-Scope, DrugBank, DTP/NCI, etc.).

Based on the identification of this new set of antiangiogenic SMs, disclosed herein are methods for inhibiting angiogenesis (particularly undesired angiogenesis) in a subject that include administering to a subject a therapeutically effective amount of at least one antiangiogenic compound (e.g., antiangiogenic small molecule) from among the compounds referred to herein as Compounds 1-77, or pharmaceutically acceptable salts thereof, examples of which are described in detail below.

Also disclosed herein are methods of inhibiting angiogenesis that include administering to a subject a therapeutically effective amount of at least one of the compounds referred to herein as Compounds 1-77, or pharmaceutically acceptable salts thereof, examples of which are described in detail below.

Further disclosed herein are compounds having a structure represented by any one of the formulas shown in TABLE 1 (referred to herein as Compounds 1-77), and pharmaceutically acceptable salts thereof. Pharmaceutical compositions that include the above-described compounds are also disclosed herein.

Thus, disclosed herein are pharmaceutical compositions for treating an angiogenesis-dependent disease, comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), chloro-

platinum(1+); 2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically-acceptable salt thereof. In particular examples, the pharmaceutical composition further comprises [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof.

Also disclosed herein are pharmaceutical compositions for inhibiting aberrant angiogenesis or inhibiting growth of neoplasitic tissue comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), 10 deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), chloroplatinum(1+); 2-(4-methylpiperidin-1-yl) ethanethiolate; dehydrate (NSC 292596), or a pharmaceuti- 15 cally-acceptable salt thereof. In particular examples, the pharmaceutical composition further comprises [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof.

Also disclosed herein are methods of treating an angiogenesis-dependent disease, comprising: administering to a subject having or predisposed to an angiogenesis-dependent disease a therapeutically effective amount of a composition comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), chloroplatinum(1+); 2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically acceptable 30 salt thereof. In particular embodiments of the methods, the composition further comprises [4-[(4-arsonophenyl)methyl] phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof.

Further disclosed herein are methods of inhibiting undesired angiogenesis in a subject, comprising: identifying a subject wherein angiogenesis is not desired, and administering to the subject a therapeutically effective amount of a composition comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), chloroplatinum(1+); 2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically 45 acceptable salt thereof. In particular examples of the disclosed methods, the composition further comprises [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof.

Also disclosed are methods of inhibiting a neoplasm in a subject, comprising: administering to the subject a therapeutically effective amount of a composition comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 55 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), chloroplatinum(1+); 2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically acceptable salt thereof. In particular examples, the composition further comprises [4-60 [(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof.

Further disclosed are methods of inhibiting angiogenesis in a tissue or a target area in a subject wherein the formation of new blood vessels is not desired, comprising identifying a 65 tissue or target area in a subject wherein the formation of new blood vessels is not desired; and introducing directly or indi4

rectly into the tissue or target area an effective amount of a composition comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), chloroplatinum(1+); 2-(4-methylpiperidin-1-yl) ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically acceptable salt thereof, thereby inhibiting angiogenesis in the tissue or target area. In particular examples, the composition further comprises [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof.

The foregoing and other objects, features, and advantages will become more apparent from the following detailed description, which proceeds with reference to the figures.

## BRIEF DESCRIPTION OF THE FIGURES

FIG. 1 shows a summarized workflow utilized for the identification of the new set of antiangiogenic SMs described herein. Additional details are provided in Example 1.

FIG. 2 shows the basic experimental design for the growth and tube formation HTS assays.

FIG. 3 shows the results on one of the plates (4143-11) included in the growth HTS using porcine aortic endothelial (PAE) cells. The plot represents fluorescence emission of all 96 wells over 7 days; as expected, fluorescence values increase over time although different wells show different fluorescence values. A composite image of all 96 wells is also shown (at day 4 of growth). Positive controls are shown in the far right column of wells; as expected, these controls show maximum values of fluorescence (in the plot) and high density of cells in the wells. A negative control is shown in the left column of wells; these show low fluorescence values in the plot and low cell density in the wells. Additionally, an example of a compound which blocks growth of PAE is shown in the first row, fourth column from the left, with low fluorescence values and few cells in the well. Furthermore, an example of a compound which does not inhibit the growth of PAE is shown in the seventh row, fourth column. In this case, high fluorescence values are shown in the plot together with a high number of cells in the well.

FIG. 4: Following the same protocol, HTS growth experiments were performed for PAE, BEC, A549 and MCF7 cells. These experiments were designed to explore the specificity of SMs with inhibitory activity in endothelial cells as compared to tumor cells from different anatomical origins.

The image in FIG. 4 shows a heatmap which summarizes the results obtained in the HTS experiments. The heatmap was constructed using the function heatmap. 2 of the package gplots of the R statistical software. Clustering was performed using Euclidean distance matrix. The X axis shows the 1974 SMs tested and the Y axis represents some of the growth HTS experiments performed. For all experiments, measurements obtained in different days have been included and as expected show a high degree of consistency. Dark cells in the heatmap represent SMs with strongest growth inhibitory activity, and lighter greys are SM with no activity on growth.

FIG. 5: In order to study SMs which preferentially inhibit the growth of endothelial cells or tumor cells, average growth activity values for endothelial cells and tumor cells were compared in a bivariate scatterplot. Most of the SMs do not have an effect on growth in any of the cell lines tested and cluster in the center of the scatterplot (indicated within the middle-sized oval). Also, most SMs with growth inhibitory activity show similar potency against tumor cells and endot-

helial cells and therefore cluster in the lower left quadrant (indicated within the largest oval). Interestingly, a few SMs showed growth inhibitory activity in tumor cells but not in endothelial cells (small oval; see also TABLE 10). Growth activity of these small molecules is shown in the adjacent plot 5 (small molecules are identified by their position in the plate; TABLE 10 correlates plate position to NSC number).

FIG. 6: Dose response curves were constructed for all the SMs of interest using PAE cells. Data were fitted to non-linear sigmoid curves using GraphPad Prism (GraphPad Software, 10 Inc., La Jolla, Calif.). Since the initial screening was performed using a final SM concentration of 1 μM, IC50 for most compounds were confirmed to be in the range of  $10^{-12}$  to  $10^{-9}$ M. This confirms that all the SMs discovered in this project are highly potent inhibitors of endothelial cell growth.

FIG. 7: In order to explore the cytotoxic potential of the SMs of interest, a novel high throughput cytotoxicity assay was developed, and is further described in U.S. application Ser. No. 12/060,752 (published as US 2009/0088341 on Apr. 2, 2009; incorporated herein by reference in its entirety). In 20 FIG. 7, two different hypothetical situations are graphically described: In the lower area of the diagram, fluorescent cells are exposed to a cytotoxic substance, which results in the release of florescence to the cell culture medium. Both the fluorescence in the medium and the remaining fluorescence in 25 the cells can be quantitated and used to calculate the percentage of cytotoxicity using the formula in the lower area of the figure. The plot shows the expected dose response curve when Triton X is used as a cytotoxic agent on PAE cells.

FIG. 8 shows an example of four compounds with growth 30 inhibitory activity, two of which present a strong and moderate cytotoxic activity respectively. Using the cytotoxicity assay illustrated in FIG. 7 and described herein, four compounds were identified as cytotoxic (NSC 88903, NSC 310551, NSC 18877, and NSC 321206; see TABLE 10).

FIG. 9 shows a screen shot from the an image analysis program named AngioApplication<sup>TM</sup>, which was developed for the HTS format and permitted a morphological quantitative analysis of tube formation (described in detail in U.S. application Ser. No. 12/060,752, which published as US 40 2009/0088341 on Apr. 2, 2009; incorporated herein by reference in its entirety). This software is able to rapidly assess a variety of metrics in images of tube formation including (but not limited to) tube length, node area, branching points, fractal dimension and lacunarity.

FIG. 10 shows how principal component analysis was used to investigate which metrics explained better the variability of the data sets. The results showed that emptiness and branching index were the most appropriate metrics.

FIG. 11: Emptiness (C1) and branching index (C2) were 50 plotted in a bivariate scatter plot for every SM tested. The Euclidean distance between the average of the positive controls and every SM was used as metric to define anti-tube formation activity (calculations were done separately for every plate). In essence, compounds which are further away 55 Annex C/St.25 text file, created on Jul. 27, 2010, 68.1 KB, from the positive controls are more likely to be antiangiogenic. This figure illustrates the results from all the SMs in one plate. As expected, most of the compounds (small squares clustered in center of graph) are located closely to the positive controls (large squares clustered near center of graph). In 60 contrast, the negative controls (large squares clustered in lower right corner of graph) are positioned farther away from the positive controls. Representative images of the positive and negative control cells are shown. Tube formation inhibitory compounds are detected as being located at an interme- 65 diate distance between the positive controls and the negative controls. A representative image of an active SM is shown. 35

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out the 1974 compounds in the library (1.75%) were found to statistically significantly inhibit tube formation (TABLE 10).

FIG. 12: IC50 were calculated for all tube formation inhibitors. As expected, most IC50 were in the range of 10<sup>-9</sup> to 10<sup>-12</sup>M, making these compounds highly effective tube formation inhibitors. This figure illustrates an example of the dose response generated with compound NSC119889.

FIG. 13 summarizes the results obtained in the growth and tube formation HTS for endothelial cells; information related to specific compounds is summarized in TABLE 10. 2.4% (48) of the compounds were growth inhibitors, and 1.75% (35) were tube formation inhibitors. 0.5% (11) of the compounds showed both growth and tube formation inhibitory activity.

FIG. 14: The antiangiogenic SMs identified in this project were structurally compared with annotated compounds in available annotated SM databases, such as PubChem, Drug-Bank, LeadScope and FDA Marketed Drugs among others. Structural classifications were performed with LeadScope software. Only a few of the SMs identified were structurally related to annotated compounds in other databases (numbers in parenthesis in the above figure). This can be explained by the novel drug discovery methodology utilized in this project, which, as expected, results in compounds with novel SARs. None of the antiangiogenic SMs discovered in this project are structurally related to any known antiangiogenic SMs. This supports the novelty of the herein described antiangiogenic SMs and emphasizes that new SARs will result in exploitation of new cellular antiangiogenic pathways.

FIG. 15 is a series of graphs showing the inhibitory effects of selected SMs on growth of tumor xenografts. Top panels show the effect of SMs on growth of A549 tumors. Bottom panels show the effect of SMs on growth of SK-ML-1 tumors.

FIG. 16 is a series of graphs showing the effects of selected 35 SMs on the inhibition of tubulin polymerization.

FIG. 17 is a series of volcano plots showing quantitative real time RT-PCR analysis of the effects of selected SMs on expression of genes implicated in angiogenesis

# SEQUENCE LISTING

The nucleic and/or amino acid sequences listed in the accompanying sequence listing are shown using standard letter abbreviations for nucleotide bases, and three letter code for amino acids, as defined in 37 C.F.R. 1.822. Only one strand of each nucleic acid sequence is shown, but the complementary strand is understood as included by any reference to the displayed strand. The SEQ ID designations in the accompanying sequence listing are set forth in Table 13. Sequences and information associated with the accession numbers listed on Table 14 (and available online at ncbi. nlm.nih.gov/guide/) are incorporated by reference herein in their entirety.

The Sequence Listing is submitted as an ASCII text file, which is incorporated by reference herein.

# DETAILED DESCRIPTION OF SEVERAL **EMBODIMENTS**

# I. Abbreviations

bFGF: basic fibroblast growth factor

EC50: The term half maximal effective concentration

FDA: Food and Drug Administration

GFP: green fluorescent protein

HTS: high throughput screen

PAE: porcine aortic endothelial RTK: receptor tyrosine kinase SAR: structure-activity relationship

SMs: small molecules RFP: red fluorescent protein

VEGF: vascular endothelial growth factor

YFP: yellow fluorescent protein

### II. Terms

Unless otherwise noted, technical terms are used according to conventional usage. Definitions of common terms in molecular biology can be found in Benjamin Lewin, Genes V, published by Oxford University Press, 1994 (ISBN 0-19-854287-9); Kendrew et al. (eds.), The Encyclopedia of Molecular Biology, published by Blackwell Science Ltd., 1994 (ISBN 0-632-02182-9); and Robert A. Meyers (ed.), Molecular Biology and Biotechnology: a Comprehensive Desk Reference, published by VCH Publishers, Inc., 1995 20 (ISBN 1-56081-569-8).

Unless otherwise explained, all technical and scientific terms used herein have the same meaning as commonly understood by one of ordinary skill in the art to which this disclosure belongs. The singular terms "a," "an," and "the" 25 include plural referents unless context clearly indicates otherwise. Similarly, the word "or" is intended to include "and" unless the context clearly indicates otherwise. The term "comprises" means "includes." The abbreviation, "e.g." is derived from the Latin exempli gratia, and is used herein to 30 indicate a non-limiting example. Thus, the abbreviation "e.g." is synonymous with the term "for example." All chemical compounds include both the (+) and (-) stereoisomers (as well as either the (+) or (-) stereoisomer), and any tautomers thereof. It is further to be understood that all molecular weight 35 or molecular mass values given for compounds are approximate, and are provided for description. Although methods and materials similar or equivalent to those described herein can be used in the practice or testing of this disclosure, suitable methods and materials are described herein. In addition, 40 the materials, methods, and examples are illustrative only and not intended to be limiting.

To facilitate review of the various embodiments of the disclosure, the following explanations of specific terms are provided:

Acid: A compound capable of transferring a hydrogen atom in solution. Acid is inclusive of, but not limited to, a carboxylic acid.

Administer/Administration: To give or apply, for instance to a subject. To "introduce" is understood to be equivalent to 50 "administer." This term includes topical, parenteral, oral, intravenous, intra-muscular, sub-cutaneous, inhalational, nasal, or intra-articular routes of administration, among others. By way of example, a therapeutic compound, such as an antiangiogenic agent, can be administered. Administration 55 inhibit angiogenesis. Angiogenic activity can be measured in can be local or systemic, direct or indirect.

Non-limiting examples of local administration include, but are not limited to, topical administration, subcutaneous administration, intramuscular administration, intrathecal administration, intrapericardial administration, intra-ocular 60 administration, topical ophthalmic administration, or administration to the nasal mucosa or lungs by inhalational administration. In addition, local administration includes routes of administration typically used for systemic administration, for example by directing intravascular administration to the arterial supply for a particular organ or tumor. Thus, in particular embodiments, local administration includes intra-arterial

administration and intravenous administration when such administration is targeted to the vasculature supplying a particular organ or tumor.

Systemic administration includes any route of administration designed to distribute the administered compound widely throughout the body via the circulatory system. Thus, systemic administration includes, but is not limited to, intraarterial and intravenous administration. Systemic administration also includes, but is not limited to, topical administration, subcutaneous administration, intramuscular administration, or administration by inhalation, when such administration is directed at absorption and distribution throughout the body by the circulatory system.

Direct administration or introduction involves the direct contact of a compound to a target are, such as by injection. Indirect administration or introduction involves any other method other than direct contact of the compound, for example by oral ingestion.

Alkyl: A branched or straight chain alkyl group containing only carbon and hydrogen. In certain embodiments, alkyl groups may contain one to twelve carbon atoms, particularly one to six carbon atoms. This term is further exemplified by groups such as methyl, ethyl, n-propyl, isobutyl, t-butyl, pentyl, pivalyl, heptyl, adamantyl, and cyclopentyl. Alkyl groups can either be unsubstituted or substituted with one or more substituents, e.g., halogen, alkoxy, cycloalkyl, alkylthio, trifluoromethyl, acyloxy, hydroxy, mercapto, carboxy, aryloxy, aryl, arylalkyl, heteroaryl, amino, alkylamino, dialkylamino, morpholino, piperidino, pyrrolidin-1-yl, piperazin-1-yl, or other functionality.

Amino acid moiety: A moiety that contain one or more primary, secondary or tertiary amino groups and one or more acidic carboxyl groups (-COOH) or a moiety that is a derivative or residue of an amino acid in the sense that the moiety contains one or more amino groups (e.g., —NH<sub>2</sub>) and one or more ester groups (i.e., —OC(O)—).

Animal: A living multi-cellular vertebrate organism, a category that includes, for example, mammals and birds. The term mammal includes both human and non-human mammals. Similarly, the term "subject" includes both human and veterinary subjects, for example, humans, non-human primates, dogs, cats, horses, pigs, rats, mice, and cows.

Angiogenesis: A biological process leading to the generation of new blood vessels through sprouting and/or growth from pre-existing blood vessels. The process can involve the migration and proliferation of endothelial cells from preexisting vessels. Angiogenesis occurs during pre-natal development, post-natal development, and in the adult. In the adult, angiogenesis occurs during the normal cycle of the female reproductive system, wound healing, and during pathological processes such as cancer (for a review see Battegay, J. Molec. Med. 73(7): 333-346, 1995)

Angiogenic activity: The ability of an agent to promote or an angiogenesis assay, for example using the fluorescent celllines and assays disclosed herein and/or in U.S. application Ser. No. 12/060,752 (published as US 2009/0088341 on Apr. 2, 2009; and incorporated herein by reference in its entirety).

Angiogesis-dependent disease: A disease that is at least partially dependent on the stimulation of aberrant (undesired) angiogenesis for its progression. Aberrant angiogenesis can result from misexpression of angiogenic factors in otherwise normal cells. Aberrant angiogenesis can also be stimulated by tumors producing one or more angiogenic factors.

Angiogenic factor: A molecule that affects angiogenesis, for example by stimulating or inhibiting angiogenesis.

Numerous experiments have suggested that tissues secrete factors that promote angiogenesis under conditions of poor blood supply during normal and pathological angiogenesis processes. The formation of blood vessels is initiated and maintained by a variety of factors secreted either by a cell 5 (such as a tumor cell) or by accessory cells. Many different growth factors and cytokines have been shown to exert chemotactic, mitogenic, modulatory or inhibitory activities on endothelial cells, smooth muscle cells and fibroblasts and can, therefore, be expected to participate in an angiogenic 10 process. For example, factors modulating growth, chemotactic behavior and/or functional activities of vascular endothelial cells include aFGF, bFGF, angiogenin, angiotropin, epithelial growth factor, IL-8, and vascular endothelial growth factor (VEGF) among others.

Because many angiogenic factors are mitogenic and chemotactic for endothelial cells, their biological activities (such as angiogenic activities) can be determined in vitro by measuring the induced migration of endothelial cells or the effect of these factors on endothelial cell proliferation using 20 the cell-lines assays and methods disclosed herein. For example, migration assays and other assays, such as tubule formation assays and growth assays can also be used to determine angiogenic activity, for example the angiogenic activity in the presence of a test agent, such as a potential angiogenesis 25 inhibitor.

Aryl: A monovalent unsaturated aromatic carbocyclic group having a single ring (e.g., phenyl) or multiple condensed rings (e.g., naphthyl or anthryl), which can optionally be unsubstituted or substituted with, e.g., halogen, alkyl, 30 alkoxy, mercapto (—SH), alkylthio, trifluoromethyl, acyloxy, hydroxy, mercapto, carboxy, aryloxy, another aryl, arylalkyl, heteroaryl, amino, alkylamino, dialkylamino, morpholino, piperidino, pyrrolidin-1-yl, piperazin-1-yl, or other functionality.

Biological sample: A sample obtained from a plant or animal subject about which information is desired, for example, information about the samples ability to promote cellular growth, tubule formation, and/or cellular migration. As used herein, biological samples include all clinical 40 samples, including, but not limited to, cells, tissues, and bodily fluids, such as: blood; derivatives and fractions of blood, such as serum, and lymphocytes (such as B cells, T cell, and subfractions thereof); extracted galls; biopsied or surgically removed tissue, including tissues that are, for 45 example, unfixed, frozen, fixed in formalin and/or embedded in paraffin; tears; milk; skin scrapes; surface washings; urine; sputum; cerebrospinal fluid; prostate fluid; pus; bone marrow aspirates; middle ear fluids, bronchoalveolar levage, tracheal aspirates, sputum, nasopharyngeal aspirates, oropharyngeal 50 aspirates, or saliva. In particular embodiments, the biological sample is obtained from an animal subject, such as in the form of middle ear fluids, bronchoalveolar levage, tracheal aspirates, sputum, nasopharyngeal aspirates, oropharyngeal aspirates, or saliva. In particular embodiments, the biological 55 sample is obtained from a subject, such as blood or serum. A patient sample is a sample obtained from a subject, such as a mammalian subject, for example a human subject under medical care.

Cellular activity: An activity of a particular cell-line, such 60 as the ability of the cell to divide, migrate in response to stimulus, or to form three dimensional structures, such as tubules. Cellular activity(s) of a particular cell-line can be assessed using in vitro assays, for example the assays disclosed herein.

Cancer: A malignant disease characterized by the abnormal growth and differentiation of cells. "Metastatic disease"

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refers to cancer cells that have left the original tumor site and migrate to other parts of the body for example via the blood-stream or lymph system.

Examples of hematological tumors include leukemias, including acute leukemias (such as acute lymphocytic leukemia, acute myelogenous leukemia, acute myelogenous leukemia and myeloblastic, promyelocytic, myelomonocytic, monocytic and erythroleukemia), chronic leukemias (such as chronic myelocytic (granulocytic) leukemia, chronic myelogenous leukemia, and chronic lymphocytic leukemia), polycythemia vera, lymphoma, Hodgkin's disease, non-Hodgkin's lymphoma (indolent and high grade forms), multiple myeloma, Waldenstrom's macroglobulinemia, heavy chain disease, myelodysplastic syndrome, hairy cell leukemia, and myelodysplasia.

Examples of solid tumors, such as sarcomas and carcinomas, include fibrosarcoma, myxosarcoma, liposarcoma, chondrosarcoma, osteogenic sarcoma, and other sarcomas, synovioma, mesothelioma, Ewing's tumor, leiomyosarcoma, rhabdomyosarcoma, colon carcinoma, lymphoid malignancy, pancreatic cancer, breast cancer (such as adenocarcinoma), lung cancers, gynecological cancers (such as, cancers of the uterus (e.g., endometrial carcinoma), cervix (e.g., cervical carcinoma, pre-tumor cervical dysplasia), ovaries (e.g., ovarian carcinoma, serous cystadenocarcinoma, mucinous cystadenocarcinoma, endometrioid tumors, celioblastoma, clear cell carcinoma, unclassified carcinoma, granulosa-thecal cell tumors, Sertoli-Leydig cell tumors, dysgerminoma, malignant teratoma), vulva (e.g., squamous cell carcinoma, intraepithelial carcinoma, adenocarcinoma, fibrosarcoma, melanoma), vagina (e.g., clear cell carcinoma, squamous cell carcinoma, botryoid sarcoma), embryonal rhabdomyosarcoma, and fallopian tubules (e.g., carcinoma)), prostate cancer, hepatocellular carcinoma, squamous cell carcinoma, basal cell carcinoma, adenocarcinoma, sweat gland carcinoma, medullary thyroid carcinoma, papillary thyroid carcinoma, pheochromocytomas sebaceous gland carcinoma, papillary carcinoma, papillary adenocarcinomas, medullary carcinoma, bronchogenic carcinoma, renal cell carcinoma, hepatoma, bile duct carcinoma, choriocarcinoma, Wilms' tumor, cervical cancer, testicular tumor, seminoma, bladder carcinoma, and CNS tumors (such as a glioma, astrocytoma, medulloblastoma, craniopharyogioma, ependymoma, pinealoma, hemangioblastoma, acoustic neuroma, oligodendroglioma, menangioma, melanoma, neuroblastoma and retinoblastoma), and skin cancer (such as melanoma and nonmelanoma).

Cell culture: The process by which either prokaryotic or eukaryotic cells are grown under controlled conditions. In practice the term "cell culture" has come to refer to the culturing of cells derived from multicellular eukaryotes, especially animal cells, such as mammalian cells, for example the fluorescent cells disclosed herein. Mammalian cells are grown and maintained at an appropriate temperature and gas mixture (typically, 37° C., 5% CO<sub>2</sub>) in a cell incubator. Culture conditions vary widely for each cell type, and variation of conditions for a particular cell type can result in different phenotypes being expressed. Aside from temperature and gas mixture, the most commonly varied factor in culture systems is the growth medium. Recipes for growth media can vary in pH, glucose concentration, growth factors, and the presence of other nutrient components. The growth factors used to supplement media are often derived from animal blood, such as calf serum.

Some cells naturally live without attaching to a surface, such as cells that exist in the bloodstream. Others require a surface, such as most cells derived from solid tissues. Cells

grown unattached to a surface are referred to as suspension cultures. Other adherent cultures cells can be grown on tissue culture plastic, which may be coated with extracellular matrix components (for example collagen or fibronectin) to increase its adhesion properties and provide other signals needed for growth. "Co-culture" refers to the culture of more than one cell-line (such as more than one of the disclosed cell-lines) in a single vessel. Co-cultures can be 2-dimensional (2-D) or 3-dimensional (3-D). Examples of both 2-D and 3-D co-cultures are described in U.S. patent application Ser. No. 12/802,666, filed on Jun. 10, 2010 \*published as now U.S. Pat. No. 8,679,836 on Mar. 25, 2014).

Chemotherapeutic agents: Any chemical agent with therapeutic usefulness in the treatment of diseases characterized by abnormal cell growth. Such diseases include tumors, neoplasms, and cancer as well as diseases characterized by hyperplastic growth such as psoriasis. In one embodiment, a chemotherapeutic agent is an angiogenesis inhibitor. Chemotherapeutic agents are described for example in Slapak and 20 Kufe, Principles of Cancer Therapy, Chapter 86 in Harrison's Principles of Internal Medicine, 14th edition; Perry et al., Chemotherapy, Ch. 17 in Abeloff, Clinical Oncology 2nd ed., 2000 Churchill Livingstone, Inc; Baltzer and Berkery. (eds): Oncology Pocket Guide to Chemotherapy, 2nd ed. St. Louis, 25 Mosby-Year Book, 1995; Fischer Knobf, and Durivage (eds): The Cancer Chemotherapy Handbook, 4th ed. St. Louis, Mosby-Year Book, 1993. Combination chemotherapy is the administration of more than one agent to treat cancer, for example an alkylating agent and an angiogenesis inhibitor.

Contacting: To place in direct physical association, including in solid or in liquid form. Contacting can occur in vivo, for example by administering an agent to a subject, or in vitro for example with isolated cells or cell-cultures, for example cell-cultures of the disclosed fluorescent cell-lines.

Control: A reference standard. A control can be a known value indicative of basal cellular activity, such as basal migratory potential, doubling time, tubule formation potential and the like, or a control cell-culture, such as a culture including at least one of the disclosed fluorescent cell-lines, not treated 40 with an exogenous agent, such as a test agent, one or more cell-lines (such as the fluorescent cell-lines disclosed herein), angiogenic factor, angiogenic inhibitor, or the like. A difference between a test sample and a control can be an increase or conversely a decrease. The difference can be a qualitative 45 difference or a quantitative difference, for example a statistically significant difference. In some examples, a difference is an increase or decrease, relative to a control, of at least about 10%, such as at least about 20%, at least about 30%, at least about 40%, at least about 50%, at least about 60%, at least 50 about 70%, at least about 80%, at least about 90%, at least about 100%, at least about 150%, at least about 200%, at least about 250%, at least about 300%, at least about 350%, at least about 400%, at least about 500%, or greater then 500%.

Cycloalkyl: Includes a moiety that contains at least one 55 cycloalkyl ring structure. There may be one or more ring structures including a bridged cyclic structure or a fused ring structure. The cycloalkyl may be unsubstituted or substituted with one or more substituents, e.g., halogen, alkoxy, alkylthio, trifluoromethyl, acyloxy, hydroxy, mercapto, carboxy, 60 aryloxy, aryl, arylalkyl, heteroaryl, amino, alkylamino, dialkylamino, morpholino, piperidino, pyrrolidin-1-yl, piperazin-1-yl, or other functionality. Illustrative cycloalkyl groups include cyclopropyl, cyclopentyl, cyclohexyl, cyclobutyl, and decahydronaphthyl.

EC50: The term half maximal effective concentration (EC50 or  $EC_{50}$ ) refers to the concentration of a drug which

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induces a response halfway between the baseline and maximum. EC50 is commonly used as a measure of drug potency.

Electromagnetic radiation: A series of electromagnetic waves that are propagated by simultaneous periodic variations of electric and magnetic field intensity, and that includes radio waves, infrared, visible light, ultraviolet light, X-rays and gamma rays. In particular examples, electromagnetic radiation is emitted by a laser, which can possess properties of monochromaticity, directionality, coherence, polarization, and intensity. Lasers are capable of emitting light at a particular wavelength (or across a relatively narrow range of wavelengths), for example such that energy from the laser can excite one fluorophore with a specific excitation wavelength but not excite a second fluorophore with a specific excitation wavelength difference and distinct from the excitation wavelength on the first fluorophore.

Emission or emission signal: The light of a particular wavelength generated from a source. In particular examples, an emission signal is emitted from a fluorophore, such as a fluorescent protein, after the fluorophore absorbs light at its excitation wavelength(s).

Excitation or excitation signal: The light of a particular wavelength necessary and/or sufficient to excite an electron transition to a higher energy level. In particular examples, an excitation is the light of a particular wavelength necessary and/or sufficient to excite a fluorophore, such as a fluorescent protein, to a state such that the fluorophore will emit a different (such as a longer) wavelength of light then the wavelength of light from the excitation signal.

Exogenous agent: An exogenous agent is any agent external to a target cell-line that is to be studied, and it includes small molecules, proteins, biological samples (such as patient samples) and other cells or cell-lines, such as fluorescent cell-lines other than the target cell-line, for example a different type of cell that can by identified as different by a distinguishable fluorescent signal.

Expression: With respect to a gene sequence, refers to transcription of the gene and, as appropriate, translation of the resulting mRNA transcript to a protein. Thus, expression of a protein coding sequence, such as the expression of a fluorescent protein, results from transcription and translation of the coding sequence for that protein. Constitutive expression refers to the expression of a gene product, such as a protein, for example a fluorescent protein, in a substantial continuous manner, such that the expression is not interrupted. An example of constitutive expression is continuous expression in the absence of an exogenous stimulating agent, such as an agent used to activate a promoter. Stable expression refers to expression that is not lost or reduced substantially over time, for example expression that does not diminish through multiple passages of a cell-line, for example a cell-line constitutively expressing a fluorescent protein.

Fluorescent property: A characteristic of a fluorescent molecule, such as a fluorescent protein, for example green fluorescent protein, red fluorescent protein, yellow fluorescent protein, cyan fluorescent protein and the like. Examples of fluorescent properties include the molar extinction coefficient at an appropriate excitation wavelength, the fluorescence quantum efficiency, the shape of the excitation spectrum or emission spectrum (the "fluorescence spectrum," the excitation wavelength maximum and emission wavelength maximum, the ratio of excitation amplitudes at two different wavelengths, the ratio of emission amplitudes at two different wavelengths, the excited state lifetime, or the fluorescence anisotropy. Quantifying fluorescence refers to the determination of the amount of fluorescence generated by a fluorophore, for example a fluorescent protein, which can be the

quantity of photons emitted by a fluorophore. In some examples, fluorescence is quantified by measuring the intensity of a fluorescence signal at a particular wavelength, for example the wavelength of the emission maxima of a particular fluorophore, such as a fluorescent protein. Fluorescence intensity can also be quantified at a wavelength that is not the emission maxima of a particular fluorophore, for example to avoid emission spectra that overlap and thereby interfere with the emission maxima of a particular fluorophore, such as a particular fluorescent protein. In some examples, a fluorescence signal is emitted by a population of fluorescent proteins, for example fluorescent proteins present in a population of cells containing such fluorescent proteins. Such a signal can be quantified, for example to determine the number, or 15 relative number of cells that emit such a fluorescent signal. Detecting a pattern of fluorescence refers to the correlation of a fluorescent signal to a specific location to determine the location where a fluorescence signal, such as a fluorescent signal of a particular wavelength, originates. In some 20 examples, a pattern of fluorescence determines the location and or shape of the cells that emit a fluorescence signal, such as cells containing a fluorescent protein, for example to determine the number of the total area of the tubules, the total number of tubules, number of nodes, number of branch 25 points, the number of tubes per node, or node area formed by such cells using the methods disclosed herein, and disclosed in U.S. application Ser. No. 12/060,752 (published as US 2009/0088341 on Apr. 2, 2009; and incorporated herein by reference in its entirety).

Fluorescent protein: A protein capable of emission of a detectable fluorescent signal. Fluorescent proteins can be characterized by the wavelength of their emission spectrum. For example green fluorescent protein (GFP) has a fluorescent emission spectrum in the green part of the visible spec- 35 trum. In addition to green-fluorescent proteins, fluorescent proteins are known which fluoresce in other regions of the visible spectrum, for example blue-fluorescent proteins, cyan-fluorescent proteins, yellow-fluorescent proteins, orange-fluorescent proteins, red-fluorescent proteins, and far- 40 red fluorescent proteins. Examples of fluorescent proteins can be found in the following patent documents: U.S. Pat. Nos. 5,804,387; 6,090,919; 6,096,865; 6,054,321; 5,625,048; 5,874,304; 5,777,079; 5,968,750; 6,020,192; 6,146,826; 6,969,597; 7,150,979; 7,157,565; and 7,166,444; and pub-45 lished international patent applications WO 07/085,923; WO 07/052.102, WO 04/058973, WO 04/044203, 03/062270; and WO 99/64592. Additional examples of fluorescent proteins are available from Clonetech, Laboratories, Inc. (Mountain View, Calif.) under the trade name Living 50 Colors®. Nucleic acids encoding such fluorescent proteins can be incorporated into mammalian expression vectors for use in producing the disclosed fluorescent cell-lines.

Growth rate: The expansion of the number of cells of a specified cell-line through cell division as a function of time. 55 In one example the growth rate is the rate at which a cell-line grown in culture doubles.

Halogen: Refers to fluoro, bromo, chloro and iodo substituents.

High throughput technique: Through this process one can 60 rapidly identify active compounds, antibodies or genes which affect a particular biomolecular pathway, for example pathways in angiogenesis. In certain examples, combining modern robotics, data processing and control software, liquid handling devices, and sensitive detectors, high throughput 65 techniques allows the rapid screening of potential pharmaceutical agents in a short period of time.

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Histology: The study of the microscopic anatomy and classification of tissue, including the histology of mammalian cells, such as cells and cell-lines from mammalian tissues. Histological typing refers to the categorizing of tissue into histological types, for example by microanatomical origin (such as connective tissue, nerves, muscles, and circulatory cells, among others) or cell-types (such as epithelial cells, stromal cells among others). Cells can be classified as being of different histological types by virtue of the staining and/or reaction with antibodies, or by characteristic microanatomical features. Cells of different histological types interact differently with different stains and/or antibodies. Methods for histological typing are well known in the art. Histology can be use to determine if cells are of different types. Thus, in some examples different cell-lines are histologically different celllines.

Immortalized cell or cell-line: A cell or cell-line that has acquired the ability to proliferate indefinitely either through random mutation or deliberate modification, such as artificial expression of the telomerase gene. There are numerous well established immortalized cell-lines representative of particular cell types.

Inhibitor (for example, of angiogenesis): A substance capable of inhibiting [something] to some measurable extent, for example angiogenesis. In disclosed examples, inhibition of angiogenesis is measured in one of the assays disclosed herein.

Mammal: This term includes both human and non-human mammals. Similarly, the term "subject" includes both human and veterinary subjects, for example, humans, non-human primates, mice, rats, dogs, cats, horses, and cows.

Migration potential: The ability of cells, such as the cellline disclosed herein, to translocate in response to a chemical stimulus, such as a growth factor. Migration potential can be determined with the assays disclosed herein.

Mixed cell population: A population of cells, such as cells in culture, that contains two or more different types of cells, such as histologically different cell-lines. Examples of different types of cells include cells of different embryonic origin (such as cells originating from the ectoderm, endoderm, or mesoderm), cells from different cellular locations (such as cells from epithelium, endothelium, or stroma), cells from different tissues or organs (such as cells from pulmonary myocardial, neural, vascular, skin, bone, or skeletal or smooth muscle tissue).

Neoplasm or tumor: Any new and abnormal growth; particularly a new growth of tissue in which the growth is uncontrolled and progressive. A neoplasm, or tumor, serves no useful function and grows at the expense of the healthy organism.

In general, tumors appear to be caused by abnormal regulation of cell growth. Typically, the growth of cells in the body is strictly controlled; new cells are created to replace older ones or to perform new functions. If the balance of cell growth and death is disturbed, a tumor may form. Abnormalities of the immune system, which usually detects and blocks aberrant growth, also can lead to tumors. Other causes include radiation, genetic abnormalities, certain viruses, sunlight, tobacco, benzene, certain poisonous mushrooms, and aflatoxins.

Tumors are classified as either benign (slow-growing and usually harmless depending on the location), malignant (fast-growing and likely to spread and damage other organs or systems) or intermediate (a mixture of benign and malignant cells). Some tumors are more common in men or women, some are more common amongst children or elderly people, and some vary with diet, environment and genetic risk factors.

Symptoms of neoplasms depend on the type and location of the tumor. For example, lung tumors can cause coughing, shortness of breath, or chest pain, while tumors of the colon can cause weight loss, diarrhea, constipation and blood in the stool. Some tumors produce no symptoms, but symptoms that 5 often accompany tumors include fevers, chills, night sweats, weight loss, loss of appetite, fatigue, and malaise.

Blood vessels supply tumors with nutrients and oxygen. Tumor growth is dependent on the generation of new blood vessels that can maintain the needs of the growing tumor, and 10 many tumors secrete substances (angiogenic factors) that are able to induce proliferation of new blood vessels (angiogenesis). Anti-tumor therapies include the use of angiogenesis inhibitors, which reduce the formation of blood vessels in the tumor, effectively starving the tumor and/or cause the tumor 15 to drown in its own waste.

Neovascularization: The growth of new blood vessels. Neovascularization can be the proliferation of blood vessels in tissue not normally containing them, or the proliferation of Neovascularization can be pathological when it is unwanted or mediates a pathological process, for example when it occurs in the retina or cornea.

Passaging cells: Passaging or splitting cells involves transferring a small number of cells into a new vessel. Cells can be 25 cultured for a longer time if they are split regularly, as it avoids the senescence associated with prolonged high cell density. Suspension cultures are easily passaged with a small amount of culture containing a few cells diluted in a larger volume of fresh media. For adherent cultures, cells first need 30 to be detached; which is typically done with a mixture of trypsin-EDTA. A small number of detached cells can then be used to seed a new culture.

Pharmaceutical agent or drug: A chemical compound or composition capable of inducing a desired therapeutic or 35 prophylactic effect when properly administered to a subject (such as the inhibition of angiogenesis), alone or in combination with another therapeutic agent(s) or pharmaceutically acceptable carriers. Pharmaceutical agents include, but are not limited to, angiogenic factors, for example bFGF, and 40 VEGF, and anti-angiogenic factors, such as inhibitors of bFGF, or VEGF. For example, suitable anti-angiogenic factors include, but are not limited to, SU5416, which is a specific VEGF-R antagonist, SU6668 which blocks the receptors for VEGF, bFGF, and PDGF and Avastin®. See, for example, 45 Liu et al., Seminars in Oncology 29 (Suppl 11): 96-103, 2002; Shepherd et al., Lung Cancer 34:S81-S89, 2001. The term pharmaceutical agent also can be applied to the bioactive compounds discussed herein, including specifically the antiangiogenic compounds listed in TABLE 1, and characterized 50 in TABLE 10.

Pharmaceutically acceptable carriers: The pharmaceutically acceptable carriers of use are conventional. Remington's Pharmaceutical Sciences, by E. W. Martin, Mack Publishing Co., Easton, Pa., 15th Edition, 1975, describes 55 compositions and formulations suitable for pharmaceutical delivery of the compositions disclosed herein.

In general, the nature of the carrier will depend on the particular mode of administration being employed. For instance, parenteral formulations usually comprise injectable 60 fluids that include pharmaceutically and physiologically acceptable fluids such as water, physiological saline, balanced salt solutions, aqueous dextrose, glycerol or the like as a vehicle. For solid compositions (such as powder, pill, tablet, or capsule forms), conventional non-toxic solid carriers can 65 include, for example, pharmaceutical grades of mannitol, lactose, starch, or magnesium stearate. In addition to biologi16

cally neutral carriers, pharmaceutical compositions to be administered can contain minor amounts of non-toxic auxiliary substances, such as wetting or emulsifying agents, preservatives, and pH buffering agents and the like, for example sodium acetate or sorbitan monolaurate.

Primary cells: Cells that are cultured directly from a subject. With the exception of some derived from tumors, most primary cell cultures have limited lifespan. After a certain number of population doublings cells undergo the process of senescence and stop dividing, while generally retaining

Signal: A detectable change or impulse in a physical property that provides information. In the context of the disclosed methods, examples include electromagnetic signals, such as light, for example light of a particular quantity or wavelength, for example a wavelength of light emitted from a fluorescent

Small molecule inhibitor (for example, of an inhibitory of blood vessels in an ischemic or otherwise damaged tissue. 20 angiogenesis): A molecule, typically with a molecular weight less than 1000 Daltons, or in some embodiments, less than about 500 Daltons, wherein the molecule is capable of inhibiting, to some measurable extent, an activity of some target molecule. In particular embodiments, the small molecule inhibitor is an inhibitor of angiogenesis, which activity can be tested, detected, determined, and/or measured using methods known in the art and/or described herein.

> Test agent: Any agent that is tested for its effects, for example its effects on a cell. In some embodiments, a test agent is a chemical compound, such as an antiangiogenic agent or even an agent with unknown biological properties.

> Therapeutically effective amount/dose: A dose sufficient to have a therapeutic effect, for example to inhibit to some degree advancement, or to cause regression of the disease, or which is capable of relieving symptoms caused by the disease. For example, a therapeutically effective amount of an angiogenesis inhibitor can vary from about 0.1 nM per kilogram (kg) body weight to about 1 µM per kg body weight, such as about 1 nM to about 500 nM per kg body weight, or about 5 nM to about 50 nM per kg body weight. The exact dose of a particular therapeutic/bioactive compound is readily determined by one of skill in the art based on the potency of the compound, the age, weight, sex and physiological condition of the subject, the disease being treated, and so forth.

> Treating: Inhibiting the full development of a disease or condition, for example, in a subject who is at risk for a disease such as cancer. "Treatment" refers to a therapeutic intervention that ameliorates a sign or symptom of a disease or pathological condition after it has begun to develop. The term "ameliorating," with reference to a disease or pathological condition, refers to any observable beneficial effect of the treatment. The beneficial effect can be evidenced, for example, by a delayed onset of clinical symptoms of the disease in a susceptible subject, a reduction in severity of some or all clinical symptoms of the disease, a slower progression of the disease, an improvement in the overall health or well-being of the subject, or by other parameters well known in the art that are specific to the particular disease. A "prophylactic" treatment is a treatment administered to a subject who does not exhibit signs of a disease or exhibits only early signs for the purpose of decreasing the risk of developing pathology.

> Tubule formation potential: The ability of a cell-line to form a tube-like structure in vitro, for example a structure similar to a blood vessel, such as a capillary. Tubule formation potential can be determined by determining the pattern displayed by cells which have been induced to form tubules, for

example by determining the pattern of fluorescence from cells expressing fluorescent proteins, such as the cell-lines disclosed herein.

#### III. Description of Several Embodiments

Described herein is a stringent HTS strategy which, together with advanced bioinformatics mining tools, was used to identify a new set of antiangiogenic small molecules. The strategy included the following:

Two cell-based HTS were designed to identify small molecules that block the main steps of the angiogenic process: growth of endothelial cells and tube formation. In both assays, compounds were tested at a low final concentration (1  $\mu M$ ) to avoid false positives. The following classes of bioactive SMs were identified in these assays: 48 growth inhibitors, 35 tube formation inhibitors. 11 SMs block both growth and tube formation. 3 SMs have been identified as specific inhibitors of tumor growth; these compounds are not antiangiogenic but are antitumoral. See TABLE 10 for a summary of 20 the HTS results

All bioactive compounds were tested for their ability to induce cytotoxicity and apoptosis in endothelial cells. Three out the 77 small molecules were cytotoxic. These cytotoxic SMs were not considered for in vivo experiments. Another 25 three SM showed 5-8 fold increase in apoptotic potential, and 11 showed a 2-3 fold increase (see TABLE 10).

Structure similarity analysis has revealed that most of the bioactive SMs (68) are not structurally related to existing FDA marketed antiangiogenic SMs, SMs currently in clinical 30 trials or SMs annotated as angiogenesis modulators in Pub-Chem, DrugBank, LeadScope, etc. Therefore, based on structure-activity relationship (SAR), the compounds identified herein (see TABLE 1) represent a new set of antiangiogenic compounds functionally unrelated to known antiangiogenic SMs. Additional SAR analysis has identified a number of scaffolds which correlate with inhibitory activity of both endothelial cell growth and endothelial cell tube formation (see TABLES 2-9).

Structure-activity-relationship (SAR) studies have shown 40 a potential mechanism of action for some (14) of the SMs of interest. For instance, the structure of some of the growth inhibitors is consistent with topoisomerase II inhibitory activity while some tube formation inhibitors show structures consistent with known tubulin binders. See TABLE 10.

Comparison of the growth inhibitory activity of these compounds in endothelial cells and tumor cells has allowed their classification in several groups including: 1) SMs able to inhibit the growth of both endothelial cells and tumor cells (Compounds 1-73); and 2) SMs which inhibit the growth of 50 tumor cells but not endothelial cells (Compounds 74-77).

Thus, described herein are compounds that exhibit inhibition of undesirable angiogenesis, and methods for using these compounds to treat angiogenesis-dependent diseases or neoplasms (e.g., solid tumors). In particular, the presently dis- 55 closed method provides for inhibiting unwanted angiogenesis in a human or animal by administering to the human or animal with the undesired angiogenesis a composition comprising an effective amount of at least one of the compounds described herein, such as specifically one or more of Compounds 1 60 through 77 as shown in TABLE 1. Examples of such methods involve inhibiting angiogenesis by exposing a tissue or cell mass having the undesirable angiogenesis to an angiogenesis inhibiting amount of one or more compounds, or pharmaceutically acceptable salts or derivatives of such compounds, 65 wherein such compounds are selected from those of Compounds 1 through 77 as shown in TABLE 1.

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It will be recognized that although the compounds disclosed herein exhibit antiangiogenic properties, the mechanism for specific action by the compounds are not necessarily limited to antiangiogenic mechanisms. For example, the compounds may also exhibit cytotoxic properties (that may be independent of any antiangiogenic properties) that are useful for treating neoplasms.

Antiangiogenic drugs are among the most promising agents for the clinical management of cancer and other angiogenesis related diseases, such as endometriosis. A multibillion dollar market has developed over the past decade involving innumerable pharmaceutical companies that are in the process of developing or attempting to develop antiangiogenic SMs.

Recent advances in the understanding of the angiogenic process have impelled the development of a new group of antiangiogenic SMs. Most of the antiangiogenic SMs currently being considered in the clinic are tubulin binders or target the tyrosine kinase activity of cell surface receptors involved in the angiogenic process such as the VEGF receptor. Some of these compounds (such as inhibitors of the VEGF pathway) have already shown limited clinical success in the management of angiogenesis-related diseases, mainly cancer

In contrast to the antiangiogenic SMs that were previously identified, the innovative approach to identifying antiangiogenic compounds described herein is not restricted by the subcellular target, rather it targets the main cellular processes involved in angiogenesis. Therefore, this method has permitted the discovery of novel SM that are not related to tyrosine kinase inhibitors, tubulin binders or any other known antiangiogenic SM currently in development. Additionally this highly stringent screening design guarantees the absence of "false positives," which commonly represent a major obstacle in HTS

Therefore, the newly identified SMs provided herein (e.g., Compounds 1-77) represent new groups of high quality compound leads, defining new antiangiogenic subcellular targets and opening up the possibility of developing drugs based on mechanism of action alternative to the ones currently being considered by academic institutions and private pharmaceutical industry.

In addition, the screen employed herein has provided information about the specificity of the growth inhibitory activity of some of the bioactive SMs. For instance, some molecules have been found which inhibit the growth of tumor cells while having no substantial effect on endothelial cells. This enables advanced combinatorial drug regimens. For instance, in the treatment of angiogenesis-dependent tumors it may sometimes be important to deliver first drugs that inhibit tumor growth but do not affect endothelial cells (which are the main components of the vasculature), since drugs are delivered through the tumor vasculature and a functional vasculature is needed for drug delivery. Therefore, drugs like those found in this study with the ability to specifically inhibit tumor growth, but not endothelial cell growth (e.g., Compounds 74-77) would be of great value for such treatment. Once the tumor has been significantly reduced, drugs with inhibitory activity in both tumor cells and endothelial cells might be preferred, since both tumor cells and endothelial cells need to be targeted. A number of such drugs have also been found in this study (for instance, Compounds 1-37 and 63-73). Therefore, the SM specificity information obtained in this study will be very useful in the development of anticancer SM therapies.

The bioactive SMs identified herein represent candidates to be applied to the clinical management of a variety of angio-

genesis related diseases including (but not limited to) cancer, endometriosis, diabetic retinopathy, age-related macular degeneration, etc.

Thus, disclosed herein are pharmaceuticals composition for treating an angiogenesis-dependent disease, comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 1-benzylsulfonyl-2,4-dinitrobenzene 122657), maytansinol isobutyrate (NSC 292222), chloroplatinum(1+);2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically-acceptable salt thereof. In particular examples, the pharmaceutical compositions further comprising [4-[(4-arsonophenyl)methyl] phenyl arsonic acid (NSC 48300), or a pharmaceuticallyacceptable salt thereof. In other examples, the angiogenesisdependent disease comprises cancer, retinopathy, endometriosis, arthritis, or psoriasis. In further examples, the composition is administered topically, intravenously, orally, 20 parenterally, or as an implant. In still other examples, the pharmaceutical composition further comprises an additional angiogenesis inhibitor.

Also disclosed herein are pharmaceutical compositions for inhibiting aberrant angiogenesis, comprising at least one of 25 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzyl-sulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), chloroplatinum(1+); 2-(4-methyl)piperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically-acceptable salt thereof. In some examples, the pharmaceutical compositions further comprise [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof. In 35 some examples, the aberrant angiogenesis is stimulated by a tumor, which can be benign or malignant.

Also disclosed herein are pharmaceutical compositions for inhibiting growth of neoplastic tissue, comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one 40 chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), chloroplatinum(1+); 2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 45 292596), or a pharmaceutically-acceptable salt thereof. In particular examples, the pharmaceutical compositions further comprise [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof.

Additionally disclosed are methods of treating an angio- 50 genesis-dependent disease, comprising: administering to a subject having or predisposed to an angiogenesis-dependent disease a therapeutically effective amount of a composition comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybou-55 vardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), may tansinol isobutyrate (NSC 292222), chloroplatinum(1+); 2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically acceptable 60 salt thereof. In particular examples, the composition further comprises [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof. In further examples, the angiogenesis-dependent disease comprises cancer, retinopathy, endometriosis, arthritis, or 65 psoriasis. In some examples, the composition is administered topically, intravenously, orally, parenterally, or as an implant.

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In still other examples, the methods further comprise administering to the subject an additional angiogenesis inhibitor, such as an inhibitor of bFGF, FGF, or VEGF.

Also disclosed herein are methods of inhibiting undesired angiogenesis in a subject, comprising: identifying a subject wherein angiogenesis is not desired, and administering to the subject a therapeutically effective amount of a composition comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), may tansinol isobuty rate (NSC 292222), chloroplatinum(1+); 2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically acceptable salt thereof. In particular examples, the composition further comprises [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof. In other examples, the method further comprises administering an additional inhibitor of angiogenesis, such as an inhibitor of bFGF, FGF, or VEGF. In some examples, the undesired angiogenesis comprises tumor angiogenesis, for example wherein the tumor is benign or malignant.

Further disclosed herein are methods of inhibiting a neoplasm in a subject, comprising: administering to the subject a therapeutically effective amount of a composition comprising at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), chloroplatinum(1+);2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically acceptable salt thereof. In particular examples, the composition further comprises [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof.

Lastly, disclosed herein are methods of inhibiting angio-

genesis in a tissue or a target area in a subject wherein the

formation of new blood vessels is not desired, comprising identifying a tissue or target area in a subject wherein the formation of new blood vessels is not desired; and introducing directly or indirectly into the tissue or target area an effective amount of a composition comprising at least one 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybouvardin (NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), chloroplatinum(1+); 2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically acceptable salt thereof, thereby inhibiting angiogenesis in the tissue or target area. In particular examples, the composition further comprises [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof. In some examples, the target area comprises skin, a tumor, a retina, a joint, or endometrial tissue. In other examples, the subject has or is predisposed to developing a tumor, retinopathy, endometriosis, arthritis, or psoriasis.

#### IV. Bioactive Molecules

A set of diverse chemical compounds (Diversity Set I) was obtained from the NCI/DTP Open Chemical Repository (available on-line at dtp.cancer.gov). Diversity Set I included 1990 compounds, each of which contains at least five new pharmacophores and five or fewer rotatable bonds as determined by the Chem-X program (Oxford Molecular Group, Oxford, UK). Although Diversity Set I is no longer available

as a set, individual compounds can be obtained from the NIC/DTP Open Chemical Repository (though large amounts of NSC 675865, NSC 18877, NSC 176327, NSC 521777, NSC 166687, and NSC 119889 are not available). It will be understood by one of skill in the art that each member of Diversity Set I represents a large family of molecules, information related to which can be accessed through public databases. With the identification herein of the antiangiogenic activity of representative Compounds 1-77, methods of testing each related class of molecules for antiangiogenic activity are now enabled, as is use of any molecules identified through such screening as antiangiogenic agents. Structure similarity analyses, including structure-activity relationship analysis as described below in Section V, will be used to identify additional compounds that could potentially show antiangiogenic 15 activity. Such analysis will enable the screening of compounds that are not associated with the Diversity Set I families, but are available through public databases.

The compounds in Diversity Set I were screened for potential antiangiogenic activity, as provided herein. Table 1 includes 77 compounds from Diversity Set I that were discovered to inhibit (1) endothelial cell growth, (2) tube formation, (3) endothelial cell growth and tube formation, or (4) specific tumor cell growth without concomitant endothelial cell growth inhibition. Specifically, compounds 1-37 are endothelial cell growth inhibitors, compounds 38-62 are tube formation inhibitors, compounds 63-73 are both endothelial cell growth and tube formation inhibitors, and compounds 74-77 are specific tumor cell growth inhibitors. Of the 77 compounds found to be bioactive in the screening assays, compounds 63, 64, 67, 69, and 71 are considered to be of particular interest. Each of these compounds inhibited both endothelial cell growth and tube formation without cytotoxicity (less than 10% cytotoxicity is considered to be a basal

#### TARLE 1

	TABLE 1	
	BIOACTIVE SMALL MOLECULE	s
Com- pound	Structure	NSC Number/Nomenclature
1		NSC 329226 4-methoxy-2-nitrobenzo[e][1]benzofuran
2	$\begin{array}{c} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\$	NSC 15234 (E)-N-(9H-fluoren-2-yl)-3-phenylprop-2-en-1-imine
3	$\bigcap_{H} \bigvee_{N}$	NSC 15226 N-(9H-fluoren-2-yl)-1-pyridin-2-ylmethanimine
4	Na^ S H	NSC 24076 diethylaminomethoxymethanedithioic acid; sodium
5	CIT	NSC 26081 3-(dimethylamino)-1-(4- methoxynaphthalen-1-yl)propan-1-one chloride

BIOACTIVE SMALL MOLECULES		
Com- pound	Structure	NSC Number/Nomenclature
6		NSC 133896 2,3-dinitrofluoren-9-one
7	H O H	NSC 675865 2-(7-amino-[1,2]thiazolo[4,5-d]pyrimidin-3-yl)-5-(hydroxymethyl)oxolane-3,4-diol
8	$C_1$ — $H$ $H$ $N$ $H$ $N$ $H$ $N$ $H$	NSC 10460 [4-[(4-aminophenyl)-(4-iminocyclohexa-2,5-dien-1-ylidene)methyl]phenyl]azanium chloride
9	N	NSC 207895 7-(4-methylpiperazin-1-yl)-4-nitro-1-oxido 2,1,3-benzoxadiazol-1-ium

	BIOACTIVE SMALL MOLECULE:	S
Com- pound	Structure	NSC Number/Nomenclature
10	H H H H H H H	NSC 99445 [5-(4-amino-2-oxopyrimidin-1-yl)-3,4-dihydroxyoxolan-2-yl]methyl dihydrogen phosphate
11	H $N$	NSC 88903 6,6-dimethyl-1-(4-phenylbutyl)-1,3,5-triazine-2,4-diamine hydrochloride
12	Cl $N$ $N$ $N$ $F$ $F$	NSC 177407 5,6-dichloro-2-[3-(trifluoromethyl)phenyl]- 1H-imidazo[4,5-b]pyrazine
13	O N H H	NSC 123111 (6-Methoxy-1,5-dimethyl-4,7-dioxo-1,1a,2,4,7,8b-hexahydroazireno[2',3':3,4]-pyrrolo[1,2-a]indol-8-yl)methyl carbamate

	BIOACTIVE SMALL MOLECULES	
Com- pound	Structure	NSC Number/Nomenclature
14		NSC 329261 3-(furan-2-ylmethyl)-5-(pyridin-3-ylmethylidene)-2-sulfanylidene-1,3-thiazolidin-4-one (The crossed bond represents a double bond for which the cis- or trans-structure is unknown or can be either.)
15	CI N H	NSC 13316 [2-(4-chlorophenyl)quinolin-4-yl]-piperidin-2-ylmethanol
16	N CI	NSC 5844 N-N'-bis(7-chloroquinolin-4-yl)ethane-1,2-diamine
17	H O CI	NSC 5857 6-tert-butyl-2-[(3-tert-butyl-5-chloro-2-hydroxy-6-methylphenyl)methyl]-4-chloro-3-methylphenol

	BIOACTIVE SMALL MOLECULES	
Com- pound	Structure	NSC Number/Nomenclature
18	H OMM. H H H	NSC 656202 [(1R,2R,3E,7S,11E,13S,15S)-2-hydroxy-7-methyl-5-oxo-6-oxabicyclo[11.3.0]hexadeca-3,11-dien-15-yl] 2-(dimethylamino)acetate
19	O H	NSC 2186 3,3-bis(4-hydroxy-2-methyl-5-propan-2-ylphenyl)-2-benzofuran-1-one
20	HHHOO—H	NSC 97845 (16E)-16-hydroxyimino-13-methyl-3-(2-methylprop-2-enoxy)-6,7,8,9,11,12,14,15-octahydrocyclopenta[a]phenanthren-17-one
21	$\begin{array}{c} H \\ N \\ N \\ N \\ H \\ \end{array}$	NSC 368891 6,6-dimethyl-1-[3-(phenylsulfanylmethyl)-phenyl]-1,3,5-triazine-2,4-diamine hydrochloride

|--|

Compound

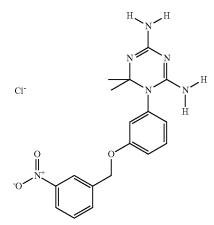
Structure

NSC Number/Nomenclature

22

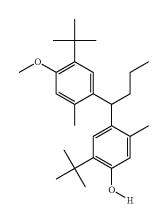
NSC 126710 5-(3,4-dichlorophenyl)-6-[(3-methyl-4-nitrophenoxy)methyl]pyrimidine-2,4-diamine

23



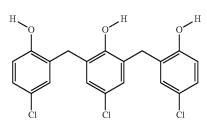
NSC 109836 6,6-dimethyl-1-[3-[(3-nitrophenyl)methoxy]-phenyl]-1,3,5-triazine-2,4-diamine chloride

24



NSC 67485 2-tert-butyl-4-[1-(5-tert-butyl-4-hydroxy-2-methylphenyl)butyl]-5-methylphenol

25



NSC 47932 4-chloro-2,6-bis[(5-chloro-2-hydroxyphenyl)methyl]phenol

BIOACTIVE SMALL MOLECULES		
	BIO. ICT. 2 SIII II 2 MODECCEDO	
Com- pound	Structure	NSC Number/Nomenclature
26	H N H	NSC 176327 3-(9-methoxy-5,11-dimethylpyrido[4,3-b]carbazol-2-ium-6-yl)propan-1-amine chloride
27	H O H O N O N O N O N O N O N O N O N O	NSC 48630 1-[(3S,8R,9S,10R,13S,14S,17R)-3,17-dihydroxy-10,13-dimethyl-1,2,3,4,7,8,9,11,12,14,15,16-dodecahydrocyclopenta[a]phenanthren-17-yl]-3-(dimethylamino)propan-1-one chloride
28	F F F H H N H	NSC 71669 5-[3-(trifluoromethyl)phenyl]-6-[[3- (trifluoromethyl)phenyl]methyl]pyrimidine- 2,4-diamine
29	$F \longrightarrow F$ $H \longrightarrow H$ $Br \longrightarrow Br$	NSC 150289 2,3-dibromo-1-(4-nitrophenyl)-3-quinolin- 4-ylpropan-1-one

	TABLE 1-continued	
	BIOACTIVE SMALL MOLECUL	ES
Com- pound	Structure	NSC Number/Nomenclature
30		NSC 311153 5,11-dimethyl-2-(2-piperidin-1-ylethyl)-6H-pyrido[4,3-b]carbazol-2-ium-9-ol acetate

NSC 45238 [(3S,8R,9S,10R,13S,14S,16E)-16-(1-acetyloxy-2,2,2-trifluoroethylidene)-10,13-dimethyl-17-oxo-2,3,4,7,8,9,11,12,14,15-decahydro-1H-cyclopenta[a]phenanthren-3-yl] acetate

NSC 156305 N-[4-(acridin-9-ylamino)phenyl]methanesulfonamide; methanesulfonic acid

BIOACTIVE SMALL MOLECULES

pound Structure

NSC Number/Nomenclature

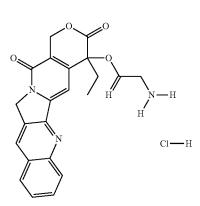
33

Com-

HOOH

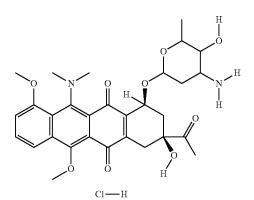
NSC 62914 2-tert-butyl-6-[[3-[(3-tert-butyl-2-hydroxy-5-methylphenyl)methyl]-2-hydroxy-5-methylphenyl]methyl]-4-methylphenol

34



NSC 606985 4-Ethyl-3,14-dioxo-3,4,12,14-tetrahydro-1H-pyrano[3',4':6,7]indolizino[1,2-b]quinolin-4-yl aminoacetate hydrochloride

35



NSC 254681 (1S,3S)-3-acetyl-11-amino-1-(4-amino-5-hydroxy-6-methyloxan-2-yl)oxy-3,6-dihydroxy-10-methoxy-2,4-dihydro-1H-tetracene-5,12-dione hydrochloride

	BIOACTIVE SMALL MOLECULES	
Com- pound	Structure	NSC Number/Nomenclature
36	H N H	NSC 268665 4-amino-1-[6-(hydroxymethyl)-2,2-diphenyl-3a,4,6,6a-tetrahydrofuro[3,4-d][1,3,2]dioxastannol-4-yl]pyrimidin-2-one
37	H O Ni O	NSC 306698 3-[(2,4- dimethylphenyl)carbamoyl]naphthalen-2- olate; N-(2,4-dimethylphenyl)-3- hydroxynaphthalene-2-carboxamide; nickel(2+)
38	H O H	NSC 4972 2-tert-butylbenzene-1,4-diol
39	o No	NSC 19630 (2,5-dioxopyrrol-1-yl)methyl propanoate

	BIOACTIVE SMALL MOLECU	JLES
Com- pound	Structure	NSC Number/Nomenclature
40	H O H	NSC 2805 2-(2,5-dihydroxy-4-methylphenyl)-5- methylbenzene-1,4-diol
41		NSC 16555 2-(4-methylphenyl)sulfonyloxyacetic acid
42	O O O O O O O O O O O O O O O O O O O	NSC 3535 [(15,4R,6R)-1,7,7-trimethyl-6-bicyclo[2.2.1]heptanyl] 2-thiocyanatoacetate
43		NSC 27063 [(E)-(4- methylsulfonylphenyl)methylideneamino] thiourea

TABLE 1-continued		
	BIOACTIVE SMALL MOLECULI	ES
Com- pound	Structure	NSC Number/Nomenclature
44	H O H	NSC 47924 1-[(4-methoxyanilino)methyl]naphthalen-2-ol
45	$\begin{array}{c} H \\ \downarrow \\ N \\ \downarrow \\ O \\ \end{array}$	NSC 36738 S-[2-0x0-2-(quinolin-6-ylamino)ethyl] carbamothioate
46	H O O O	NSC 108895 1-(1,3-benzodioxol-5-ylmethyl)pyrrolidine- 2-carboxylic acid
47	HOO	NSC 681152 methyl 4-[2-(2,5- dihydroxyphenyl)ethyl]benzoate

	BIOACTIVE SMALL MOLECULES	
Com- pound	Structure	NSC Number/Nomenclature
48	H N H	NSC 632536 4-N-phenyl-1-N-(2,2,6,6- tetramethylpiperidin-4-yl)benzene-1,4- diamine
49		NSC 122351 azidobenzene; 1H-indene; prop-1-en-2- ylbenzene
50	NH <sub>2</sub> NH NH Hg Nt	NSC 268879 (2-aminopurin-9-id-6-yl)sulfanyl- hexylmercury
51		NSC 48458 3,8-dibenzyl-5,10-ditert-butyl-2,4,7,9-tetrahydro-[1,3]oxazino[6,5-g][1,3]benzoxazine

BIOACTIVE SMALL MOLECULES			
Com- pound	Structure	NSC Number/Nomenclature	
52		NSC 209910 3,5-di(cyclododecyl)-1,3,5-thiadiazinane-2-thione	
53	CI N H	NSC 328087 2-(3,5-dichloro-2-hydroxyphenyl)-3-(2-pyridin-2-ylethyl)-1,2-dihydroquinazolin-4-one	
54	HOHH HOHH	NSC 521777 17-[(E)-2,6-dihydroxy-6-methyl-3-oxohept-4-en-2-yl]-2,16-dihydroxy-4,4,9,13,14-pentamethyl-8,10,12,15,16,17-hexahydro-7H-cyclopenta[a]phenanthrene-3,11-dione	
55	S N NH NH NH	NSC 310551 copper; [(6-methylpyridin-2- yl)methylidene-amino]- [methylsulfanyl(sulfoniumylidene)- methyl]azanide	

TABLE 1-continued  BIOACTIVE SMALL MOLECULES			
56	H H O N O	NSC 292222  Maytansinol isobutyrate or 4,24-Dioxa- 9,22-diazatetracyclo[19.3.1.110,14.03,5] hexacosane, maytansine deriv.	

NSC 321237 Mercury, (4-aminophenyl)(6thioguanosinato-N7,S6)-

NSC 259969 Deoxybouvardin or 24-hydroxy-10-(4-methoxybenzyl)-4,7,9,13,15,29-hexamethyl-22-oxa-3,6,9,12,15,29-hexaazatetracyclo-[14.12.2.2~18,21~.1~23,27~]tritriaconta-18,20,23(31),24,26,32-hexaene-2,5,8,11,14,30-hexone

### BIOACTIVE SMALL MOLECULES

Com-

pound

Structure

NSC Number/Nomenclature

59 O H N N O H

NSC 259968 Bouvardin or 17,24-dihydroxy-10-(4-methoxybenzyl)-4,7,9,13,15,29-hexamethyl-22-oxa-3,6,9,12,15,29-hexaazatetracyclo-[14,12.2.2~18,21~.1~23,27~]tritriaconta-18,20,23(31),24,26,32-hexaene-2,5,8,11,14,30-hexone

60

NSC 203328 3-bromo-4-[(2-bromo-6-tert-butyl-4-cyanophenoxy)-phenylphosphoryl]oxy-5-tert-butylbenzonitrile

61

NSC 166687 zinc; 8-hydroxy-3,4,4a,5,6,7,8,8aoctahydro-2H-quinolin-1-ide-5-sulfonic acid; 5-sulfo-1,2-dihydroquinolin-8-olate

BIOACTIVE SMALL MOLECULES			
Com- pound	Structure	NSC Number/Nomenclature	
62	Br Br O—H	NSC 119889 2,3,4,5-tetrabromo-6-(3,6-dihydroxy-9H- xanthen-9-yl)benzoic acid	
63	S N	NSC 676693 3-(4-methoxyphenyl)thieno[2,3-b]pyrrolizin-8-one	
64		NSC 122657 1-benzylsulfonyl-2,4-dinitrobenzene	
65	N Cu N N S	NSC 295642 [benzylsulfanyl(sulfoniumylidene)methyl]- (1-pyridin-2-ylethylideneamino)azanide; chlorocopper	
66	H O H	NSC 13480 (2-phenylbenzo[h]quinolin-4-yl)-piperidin-2-ylmethanol	

BIOACTIVE SMALL MOLECULES			
Com- pound	Structure	NSC Number/Nomenclature	
67	H	NSC 150117 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride	
68	O N N O O O O O O O O O O O O O O O O O	NSC 18877 [4-(1-benzothiophene-3-carbonyl)-2-oxide-1,2,5-oxadiazol-2-ium-3-yl]-(1-benzothiophen-3-yl)methanone	
69	O=As-O H O=As-O H H O=As-O	NSC 48300 [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid	
70	Br Cu N	NSC 321206 bromocopper; (dipyridin-2- ylmethylideneamino)- [methylsulfanyl(sulfoniumylidene)methyl] azanide	

BIOACTIVE SMALL MOLECULES			
Com- pound	Structure	NSC Number/Nomenclature	
71	H O H N H O H Pt <sup>+</sup> Cl	NSC 292596 chloroplatinum(1+); 2-(4-methylpiperidin- 1-yl)ethanethiolate; dihydrate	
72	Br O H Br Br	NSC 112200 2,5-dibromo-3,6-dimethylbenzene-1,4-diol; 2,5-dibromo-3,6-dimethylcyclohexa-2,5-diene-1,4-dione	
73	Au <sup>+</sup> Au <sup>+</sup> N-N  N-N  N-N  N-N  N-N  P  P	NSC 274547 gold(1+); 1-(2,3,4-triaza-5- azanidacyclopenta-1,3-dien-1-yl)-2,3,4- triaza-5-azanidacyclopenta-1,3-diene; triphenylphosphane	
74	Cl—H	NSC 4265 1,10-phenanthroline hydrochloride	

BIOACTIVE SMALL MOLECULES			
Com- pound	Structure	NSC Number/Nomenclature	
75	H	NSC 130830 5-[(benzylamino)methyl]quinolin-8-ol	
76	$\bigcap_{N} \bigcap_{H} \bigcap_{N} \bigcap_{N$	NSC 54044 N'-[1-(1-oxonaphthalen-2-ylidene)ethyl]pyridine-4-carbohydrazide	
77	$O_{N=N}$ $O_{N=N}$ $O_{N=N}$	NSC 327705 2-chloro-3-phenanthro[9,10-e]- [1,2,4]triazin-3-ylsulfanylnaphthalene-1,4- dione	

#### V. Potentially Active Related Structures

Additional potentially active compounds can be predicted by comparing the structure of any of Compounds 1-77 to the structures of other known compounds (or newly-derived compounds) and determining the similarity through structure-activity relationship (SAR) or quantitative structure-activity relationship (QSAR) analysis. There are several known methods for SAR and QSAR analysis, including Tanimoto's algorithm (Dogra, "Script for computing Tanimoto coefficient," QSARWorld, available on-line at qsarworld.com/virtual-workshop.php, Jul. 5, 2007) and LeadScope's clustering algorithm (Leadscope Inc., Columbus, Ohio). SAR and QSAR methods compare molecular structures and determine structural features shared by the molecules.

Because Compounds 1-77 (shown in TABLE 1) were derived from a diversity set of small molecules, most of the

active compounds are determined not to be structurally related when using Tanimoto's algorithm. However, clustering using LeadScope's algorithm has been used successfully to determine structural similarities between some of the compounds in TABLE 1 and other known compounds. For instance, many compounds in Diversity Set I have family members (which are related by structure) that are not included in Diversity Set I. Such family members and other compounds can be evaluated using LeadScope's algorithm, which searches for (1) large, commonly occurring substructures; (2) substructures that discriminate for a biological response; or (3) substructures that discriminate for membership in a set of compounds (Cross et al., *J. Med. Chem.*, 46:4770-4775, 2003).

Two prediction models were built based on bioactive Compounds 1-77: one for compounds that inhibit endothelial cell growth and another for compounds that inhibit tube forma-

tion. The models were built using LeadScope software, and were based on logistic regression. To develop a predictive model for small molecules that inhibit growth of endothelial cells, a total of 70 compounds with known growth inhibitory activity and 76 compounds with no inhibitory effect were used. The predictive model accurately predicted 70/70 positive compounds and accurately predicted 76/77 negative compounds, producing a concordance of 99.3% with 98.6% sensitivity and 100.0% specificity. Concordance is a measure of the overall model accuracy, i.e., 76/77=99.3%. Sensitivity is a measure of how well the model predicts true positives. Sensitivity is calculated using the equation: sensitivity=TP/ (TP+FN), where TP is the number of true positives and FN is the number of false negatives. Specificity is a measure of how 15 well the model predicts true negatives. Specificity is calculated using the equation: specificity=TN/(TN+FP), where TN is the number of true negatives and FP is the number of false positives. The concordance for a test set of molecules was 98.0%, with 69 true positives, 1 false positive, 75 true nega- 20 tives, and 2 false negatives. The sensitivity was 97.2% with 98.7% specificity. Each molecule in the training and test sets was tested in an endothelial cell growth assay to assess the accuracy of the prediction.

A predictive model for small molecules that inhibit tube 25 formation was also developed. Concordance for the training set was 100.0%, with 100.0% sensitivity and specificity. A test set of molecules produced 71.0% concordance, with 12 true positives, 8 false positives, 32 true negatives, and 10 false  $_{30}$ negatives. The sensitivity was 54.5% with 80.0% specificity. Each molecule in the training and test sets was tested in a tube formation assay to assess the accuracy of the prediction.

These predictive models were applied to various databases, including the NCI small molecule database (dtp.nci. 35 nih.gov/), DrugBank (drugbank.ca), LeadScope (leadscope.com), and PubChem (pubchem.ncbi.nlm. nih.gov/). Based on the models, several hundred small molecules have been predicted to inhibit endothelial cell growth and tube formation. For example, several substructures ("scaffolds") were identified in Compounds 1-77 that are predicted to produce endothelial cell growth inhibition or tube formation inhibition.

The scaffolds were identified using LeadScope software. 45 The software calculates a "z-score" for each compound and activity. The z-score compares the mean activity of a subset to its expected value:

$$z = (\overline{x}_1 - \overline{x}_0) \sqrt{\frac{n_1 n_0}{s_0^2 (n_0 - n_1)}}$$

(Cross et al., J. Med. Chem., 46:4770-4775, 2003) After per- 55 forming clustering analysis, each cluster contains a plurality of small molecules having a common scaffold, each molecule having a z-score value. A low z-score value indicates low values for the defined activity, e.g., growth or tube formation. Thus, a small molecule with a low z-score for growth results in less growth than a molecule with a higher z-score. An average z-score value is associated with the cluster, based on the individual z-score values of the small molecules. A cluster with a low z-score value is likely to contain small molecules 65 with individual low z-score values. In the present embodiments, only scaffolds included in clusters with an average

z-score of less than -2 were considered. For example, molecules in clusters having an average growth z-score of less than -2 are predicted to be potential growth inhibitors. These identified scaffolds have predictive value for both growth inhibition and/or tube formation inhibition.

Several representative clusters of molecules having scaffolds predicted to inhibit endothelial cell growth are shown below in TABLES 2-6. Additional molecule clusters having scaffolds predicted to inhibit tube formation are shown in TABLES 7-9.

TABLE 2 CLUSTER 368 Common Scaffold: NSC Number/

Compound Structure Nomenclature 55 NSC 310551 copper; [(6methylpyridin-2-yl) methylidene-amino]-[methylsulfanyl (sulfoniumylidene)-

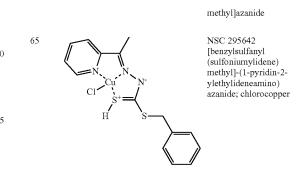


TABLE 3

IABLE 3			IABLE 3-continued	
CLUSTER 71			CLUSTER 71	
Common Scaffold:		5	Common Scaffold:	
Compound Structure N	NSC Number/ Nomenclature	15	Compound Structure	NSC Number/ Nomenclature
N 2 2 1 1 F 6	NSC 311153 ,11-dimethyl- -(2-piperidin- -ylethyl)-6H- yrido[4,3-b] arbazol-2-ium- -ol acetate	20	30-D  H-N H	NSC 176327 3-(9-methoxy- 5,11- dimethylpyrido [4,3-b]carbazol- 6-yl)propan- 1-amine (Same NSC # as 26, but not the chloride salt.)
	NSC 163443	30	TABLE 4	
	-(5,11- imethylpyrido 4,3-b]carbazol- -yl)ethyl enzoate	35	CLUSTER 358  Common Scaffold:	
	NSC 359449 !-(5,11- limethyl- iH-pyrido	40	\_	NSC Number/
	4,3-b] arbazol-2- um-2-yl)- yl-diethyl- thanamine cetate	45 50	Compound Structure  34  O  N  N  Cl-H	Nomenclature  NSC 606985 4-Ethyl-3,14- dioxo- 3,4,12,14- tetrahydro-1H- pyrano[3',4':6,7] indolizino[1,2-b] quinolin-4-yl aminoacetate
	NSC 311152 -(2-diethyl- minoethyl)- i,11-dimethyl- H-pyrido 4,3-b] arrbazol-2- um-9-ol cetate	55	34-A  N  N  Na <sup>+</sup> H  O  H	NSC 100880 sodium; hydride; 2-hydroxy-2-[8- (hydroxy- methyl)-9- oxo-11H- indolizino[1,2-b] quinolin-7-yl] butanoic acid

65

### TABLE 5 TABLE 4-continued CLUSTER 358 CLUSTER 337 ΟН ŌН Common Scaffold: Common Scaffold: 10 NSC Number/ NSC Number/ Compound Nomenclature Structure Structure Nomenclature Compound NSC 5857 17 NSC 5857 6-tert-butyl-2-[(3-tert-butyl-5-chloro-2-hydroxy-6-methylphenyl) methyl]-4-chloro-3-methylphenol 34-B NSC 609699 Topotecan, Hycamtin, 20 or 10-((dimethylamino) methyl)-4ethyl-4,9-Cl-Hdihydroxy-1H-pyrano [3',4':6,7]-25 indolizino[1,2-b] quinoline-3,14(4H,12H)dione hydrochloride 30 35 40 45 50 34-C NSC 639174 2-amino-N-(4ethyl-4-hydroxy- 55 3,14-dioxo-3,4,12,14tetrahydro-1H-O H NSC 47932 4-chloro-2,6-bis [(5-chloro-2-hydroxyphenyl) methyl]phenol pyrano[3',4':6,7] 25 Cl—H indolizino [1,2-b] 60 quinolin-10-yl) acetamide

hydrochloride

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0 /	
TABLE	6

CLUSTER 479				
Common Scaffold:				

Compound Structure Nomenclature 64 NSC 122657 1-benzylsulfonyl-2,4-dinitrobenzene

O O= =0

NSC Number/ Nomenclature Structure Compound 50  $\mathrm{NH}_2$ NSC 268879 (2-aminopurin-9-id-6-yl)sulfanylhexylmercury

NSC 321237 Mercury, (4-aminophenyl) (6-thioguanosinato-N7, S6)-57 55 OH HN ÓН 60

### TABLE 8

Compound

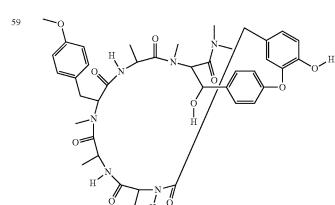
NSC Number/

Nomenclature

58

Structure

NSC 259969 Deoxybouvardin or 24-hydroxy-10-(4-methoxybenzyl)-4,7,9,13,15,29-hexamethyl-22-oxa-3,6,9,12,15,29hexaazatetracyclo-[14.12.2.2~18,21~.1~23,27~] tritriaconta-18,20,23(31),24,26,32-hexaene-2,5,8,11,14,30-hexone



NSC 259968

Bouvardin or 17,24-dihydroxy-10-(4-methoxybenzyl)-4,7,9,13,15,29-hexamethyl-22-oxa-3,6,9,12,15,29hexaaratetracyclo-[14.12.2~18,21~.1~23,27~] tritriaconta-18,20,23(31),24,26,32-hexaene-2,5,8,11,14,30-hexone

### VI. Bioactivity Tests

Once a new compound has been identified as a potential antiangiogenic compound based on comparison to one of Compounds 1-77, or the compounds additionally listed in any of TABLES 2-9, or any derivative thereof, the identified potential therapeutic compound can be tested for bioactivity. By way of example, any of the methods described herein can be used. The following list provides a description of representative but non-limiting example bioactivity assays. Additional assays will be known to those of ordinary skill; for instance, additional assays are described in U.S. application Ser. No. 12/060,752 (published as US 2009/0088341 on Apr. 2, 2009; incorporated herein by reference in its entirety).

### i. Fluorescence-Based Growth Assay

A real time growth assay has been applied to mono- or multiple-cell cultures (co-culture). The fluorescence signal

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emitted by a culture of the disclosed fluorescent cell-lines is proportional to the number of fluorescent cells present in the culture. In other words, the fluorescence signal, for example measured as the intensity of the emission maxima, from a population of fluorescent cells of one type in a culture will double as the number of fluorescent cells of that type in the culture doubles. Conversely, the fluorescence signal, for example measured as the intensity of the emission maxima, from a population of cells of one type in a culture will be reduced to half if the number of cells of that type in the culture is divided in half. These properties can be used to measure the effect of an exogenous agent, such as one or more additional cell-lines, or a test agent (such as a bioactive SM), on the fluorescent cells in culture. At some point the total fluorescence of a culture may reach signal saturation, such that the signal reaches a plateau as a function of cell number. The effect of an additional cell-line (for example a different cellline) on a first fluorescent cell-line can be determined (this can be extended to multiple cell-lines and even one or more fluorescent cell-lines, or combinations thereof, for example in a multiplex assay or 3-dimensional co-culture).

The difference between the fluorescence signal (such as the intensity of the fluorescence signal at a particular wavelength, for example the emission maxima of the fluorescence signal) attributable to the fluorescent cell-line of interest grown in co-culture with one or more additional cell-lines relative to a control in some instances will be at least about 10%, meaning that the growth rate of the cell-line of interest is either reduced or increased by at least about 10%, such as at least about 20%, at least about 30%, at least about 40%, at least about 50%, at least about 60%, at least about 70%, at least about 80%, at least about 90%, at least about 100%, at least about 150%, at least about 200%, at least about 250%, at least about 300%, at least about 350%, at least about 400%, at least about 500%, or 35 greater than 500%. The difference may be a statistically significant difference. Thus, the presence of a bioactive SM with or without one or more additional cell-lines can induce a statistically significant difference in the growth rate of a fluorescent cell-line of interest, as compared to the control, such as a value indicative of the basal rate of growth of the fluorescent cell-line, or the fluorescent cell-line of interest grown in the absence of the SM and/or other cells or cell-lines, for example grown in mono-culture. The at least one SM and/or additional cell-line (or additional cell-lines) will in some instances have a negative impact on the first fluorescent cellline, such that the number of cells of the first fluorescent cell-line is reduced as a function of time relative to a control. In other examples, the at least one SM and/or additional cell-line (or additional cell-lines) will have a positive impact 50 on the first fluorescent cell-line, such that the number of cells of the first fluorescent cell-line present in a cell culture increases as a function of time relative to a control. It is also contemplated that the fluorescent cell-line of interest can be co-cultured with primary cells, such as primary cells obtained from a subject, for example tumor cells, and the effect of the primary cells on the growth rate of the fluorescent cell-line of interest determined. Such co-cultures may be established in 2 or 3 dimensions.

The effect of each fluorescent cell-line on other fluorescent cell-line(s) present in co-culture can be determined, for example in a multiplex assay. For example, using appropriate filters or FACS analysis among other techniques, fluorescent cell-lines expressing different fluorescent proteins, such as red, green, yellow, cyan and the like fluorescent proteins can be discriminated and the fluorescent signal attributable to the different cell-lines determined. Thus, the growth rates of individual fluorescent cell-lines can be determined from a mono-

culture and/or a co-culture of two or more fluorescent celllines. Such analysis greatly enhances the information that can be obtained about the individual fluorescent cell-lines.

As described herein, in addition to determining the effect of cell-lines on a fluorescent cell-line of interest, the growth 5 assays can be used to determine if an exogenous agent, such as a test agent, for example a chemical agent (for instance a derivative of one of Compounds 1-77, or a structurally related compound), affects the growth of a fluorescent cell-line of interest. This can also be extended to multiple cell-lines (ei- 10 ther fluorescent or not grown in co-culture, for example in a multiplex assay). For instance, the growth assay can be used to determine if an exogenous agent, such as a test agent (for example a potential modulator of angiogenesis, such as a potential inhibitor of angiogenesis such as one of Compounds 15 1-77 or derivatives thereof), growth factor, patient sample, etc. affects the growth rate of a fluorescent cell-line of interest, such as one or more of the fluorescent cell-lines disclosed herein. In addition, the differential effect of the exogenous agent on the different cell-lines can be determined, as can the 20 combinatorial effect of the exogenous agent and the cells on a cell-line of interest.

A fluorescent cell-line of interest can be contacted with an exogenous agent and the impact of the exogenous agent on the growth of the fluorescent cell-line of interest can be deter- 25 mined. For example, a difference between the fluorescence signal of the fluorescent cell-line of interest and a control indicates that the exogenous agent, such as a test agent (for example a potential modulator of angiogenesis, such as a potential inhibitor of angiogenesis), growth factor, patient 30 sample, different cell-line, etc. is a modulator (such as an inhibitor) of angiogenesis. Thus, in several embodiments, one or more of the disclosed fluorescent cell-lines growing in culture are contacted with a test agent (or test agents) to determine if the test agent is a modulator of angiogenesis. 35 Exemplary test agents include compounds that are structurally related to any one of Compounds 1-77 (TABLE 1), structurally related to the scaffolds presented in any one of TABLES 2-9, derivatives or fragments of any of the compounds described herein, and so forth. Following contact with 40 the test agent, the fluorescence of the culture can be measured versus time and/or concentration to determine the impact of the exogenous agent on the one or more fluorescent cell-lines present in the culture. For example, the fluorescence signal generated by a fluorescent cell-line of interest (such as the 45 intensity of the fluorescence signal at a particular wavelength, for example the emission maxima of the fluorescence signal) can be measured to determine if the fluorescence signal attributable to the fluorescent cell-line of interest (such as the intensity of the fluorescence signal at a particular wavelength, 50 for example the emission maxima of the fluorescence signal) is increasing as a function of concentration of the exogenous agent, time, or both, for example by comparison with a control, such as a value indicative of the basal rate of growth of the fluorescent cell-line of interest or the fluorescent cell-line 55 of interest not contacted with the exogenous agent. In several embodiments, the control is a known value indicative of normal growth of the fluorescent cell-line of interest, for example the doubling time of cellular number. In some embodiments, the control is the fluorescence signal of a culture of cells 60 (typically, but not necessarily, a culture of the fluorescent cell-line of interest) not contacted with the exogenous agent.

In some embodiments, an exogenous agent, such as a test agent, decreases the growth rate of the fluorescent cell-line of interest. A test agent exhibiting such an activity is identified as 65 a potential inhibitor of angiogenesis (that is, having antiangiogenic activity) and would be of use in treating a disease or

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condition in which normal angiogenesis is increased, for example cancer. In some embodiments, a decrease in the growth rate of the fluorescent cell-line of interest relative to a control is at least about a 30%, at least about a 40%, at least about a 50%, at least about a 60%, at least about a 70%, at least about a 80%, at least about a 90%, at least about a 100%, at least about a 150%, at least about a 200%, at least about a 250%, at least about a 300%, at least about a 350%, at least about a 400%, at least about a 500% decrease. Because the fluorescence signal attributable to a fluorescent cell-line of interest is proportional to the number of cells of the cell-line of interest present, the percentage decrease can be measured as a percentage decrease in the fluorescent signal, for example the fluorescence intensity at a particular wavelength, such as the emission maxima, attributable to the cell-line of interest. In additional embodiments, the decrease is a statistically significant decrease as compared to a control.

#### ii. Fluorescence-Based Tubule Formation Assay

Cultures of fluorescent cell-lines expressing different fluorescent proteins, such as the fluorescent cell-lines disclosed herein and in U.S. application Ser. No. 12/060,752 (published as US 2009/0088341 on Apr. 2, 2009; incorporated herein by reference in its entirety) can be applied to tubule formation assays. Formation of new blood vessels is fundamental to angiogenesis and is the focus of many drug screening and cell signaling studies. Blood vessel development is a significant event in the development and growth of solid tumors, and is involved in wound healing, retinopathy and macular degeneration. Fluorescent cell-lines, and in particular the disclosed endothelial fluorescent cell-lines, are ideal for use in assays for assessing the degree of blood vessel formation using in vitro cell culture assays (see for example Auerbach et al. Clinical Chemistry 49:1, 32-40, 2003; Taraboletti and Giavazzi, EJC 40, 881-889, 2004). Because no fluorescent/colorimetric staining is needed, the tubule formation assay can be followed over time and can be directly visualized used in existing instrumentation, such as the BD Pathway<sup>TM</sup> Bioimager (BD Bioscience, San Jose, Calif.). This allows for the study of the interaction between different cells types, or between a SM(s) of interest and/or one or more cell types, in this angiogenesis in vitro assay. In addition, the effects of SMs on tubule formation potential can also be determined for a co-culture of a fluorescent cell-line of interest with primary cells, such as primary cells obtained from a subject, for example tumor cells. Such co-cultures can be established as 2-dimensional or 3-dimensional co-cultures, such as those described in U.S. patent application Ser. No. 12/802,666.

Tubule formation assays are typically based on the ability of endothelial cells, such as fluorescent endothelial cells (stably-transfected to express a fluorescent protein), to form distinct blood-vessel-like tubules in an extracellular matrix (such as BD Matrigel<sup>TM</sup> Matrix available from BD Bioscience, BME available from Trevigen, or GELTREXTM available from Invitrogen®, and the like). The cells are visualized by microscopy, such as fluorescence microscopy in the case of fluorescent cells, and the ability of one or more compounds of interest to affect the ability of a fluorescent cell-line of interest to form tubules (also called the tubule formation potential) is determined. The determination of tubule formation can be performed by manual tracing or by automated confocal imaging system, for example using a BD Pathway™ Bioimager in conjunction with AngioApplication<sup>TM</sup>. Using fluorescent cell-lines, tubule formation assays can be performed on live cells, for example to avoid artifacts that may arise from fixation of cells, such as the disruption of tubules. Several parameters can be measured in tubule formation assays, such as the total area of the tubules, the total number

of tubules, number of nodes, number of branch points, the number of tubes per node, and/or node area. In some embodiments, the tubule formation potential is determined by a computer implemented method, for example using the program AngioApplication<sup>TM</sup>.

Fluorescent cell-lines can be used to determine the effects of an exogenous agent, such as cell-lines and test agents, on tubule formation. In particular examples, a test agent is one or more compounds that are structurally related to any one of Compounds 1-77 (TABLE 1), structurally related to the scaffolds presented in any one of TABLES 2-9, derivatives or fragments of any of the compounds described herein, and so forth. In some embodiments, multiple fluorescent cell-lines are grown in co-culture. Thus, the effect of each fluorescent cell-line on the other fluorescent cell-line(s) present can be 15 determined, or the differential effect of an exogenous agent, such as a test agent, or patient sample, on the different celllines can be assessed in a multiplex assay. For example using appropriate filters, the fluorescent signal from fluorescent cell-lines expressing different fluorescent proteins, such as 20 red, green, yellow, cyan fluorescent proteins can be discriminated and the fluorescent signal attributable from the different fluorescent cell-lines determined. Thus, the tubule formation potential of individual cell-lines can be determined from a mono-culture or even a co-culture, for example a co-culture 25 of more than one fluorescent cell-line.

When grown in co-culture, a difference between the tubule formation potential of the fluorescent cell-line of interest from a control, such a mono-culture of the fluorescent cellline of interest indicates that the other cell-line(s) is a modulator of angiogenesis, as evidenced by the difference in tubule formation potential. In some embodiments, the difference between the tubule formation potential, for example as measured by the number of least one of the total area of the tubules, the total number of tubules, number of nodes, number 35 of branch points, the number of tubes per node, or node area formed in the co-culture of the fluorescent cell-line of interest relative to a control is at least about 10%, such as at least about 20%, at least about 30%, at least about 40%, at least about 50%, at least about 60%, at least about 70%, at least about 40 80%, at least about 90%, at least about 100%, at least about 150%, at least about 200%, at least about 250%, at least about 300%, at least about 350%, at least about 400%, at least about 500%, or greater than 500%. In some embodiments, the difference is a statistically significant difference. Thus, a cell- 45 line can induce a statistically significant difference in the tubule formation potential of a fluorescent cell-line of interest, such as one of the disclosed fluorescent cell-lines. Taking a combinatorial approach the impact of multiple different cell-lines either alone or in combination on the tubule forma- 50 tion potential of the fluorescent cell-line of interest can be determined. In some examples, the presence of one or more additional cell-lines decreases the tubule formation potential of the fluorescent cell-line of interest, for example as measured by the total area of the tubules, the total number of 55 tubules, number of nodes, number of branch points, the number of tubes per node, or node area formed by the fluorescent cell-line of interest. These cell-lines would be identified as negative regulators of angiogenesis.

Utilizing fluorescent cell-lines, tubule formation assays 60 can also be used to screen for a biological effect of a test agent, such as the effect of potential modulators of angiogenesis, for example compounds that are structurally related to any one of Compounds 1-77 (TABLE 1), structurally related to the scaffolds presented in any one of TABLES 2-9, derivatives or 65 fragments of any of the compounds described herein, and so forth. In some embodiments, a fluorescent cell-line of interest

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(or multiple cell-lines of interest in a multiplex assay) is contacted with an exogenous agent, such as a cell-line or test agent, and the impact of the exogenous agent on tubule formation potential can be determined. Exemplary test agents are provided herein. For example using the difference between the total area of the tubules, the total number of tubules, number of nodes, number of branch points, the number of tubes per node, and/or node area between a fluorescent cell-line of interest and a control are used to determine if an exogenous agent, such as a test agent, impacts the ability of a fluorescent cell-line of interest to form tubules. A difference between the tubule formation potential of a fluorescent cellline of interest contacted with an exogenous agent and a control (such as a control culture exposed to the exogenous agent) indicates that the exogenous agent is a modulator of angiogenesis. In some embodiments, the difference between the tubule formation potential of the fluorescent cell-line contacted with an exogenous agent relative to a control is at least about 10%, such as at least about 20%, at least about 30%, at least about 40%, at least about 50%, at least about 60%, at least about 70%, at least about 80%, at least about 90%, at least about 100%, at least about 150%, at least about 200%, at least about 250%, at least about 300%, at least about 350%, at least about 400%, at least about 500%, or greater than 500%. In some embodiments, the difference is a statistically significant difference. Thus, an exogenous agent can induce a statistically significant difference in the tubule formation potential of the fluorescent cell-line of interest contacted with the test agent, as compared to the control, such as the fluorescent cell-line of interest not contacted with the exogenous agent.

In one embodiment, the exogenous agent decreases the ability of a fluorescent cell-line of interest to form tubules. A test agent exhibiting such an activity is identified as a potential inhibitor of angiogenesis and would be of use in treating a disease or condition in which normal angiogenesis is increased, for example cancer. Such agents could be used alone, or in combination with other agents (such as, but not limited to a SM, peptide or antibody) known to inhibit angiogenesis by a similar or complementary mechanism (such as at a different step in the angiogenesis pathway). In some embodiments, a decrease in the tubule formation potential of the fluorescent cell-line of interest is at least about a 30%, at least about a 40%, at least about a 50%, at least about a 60%, at least about a 70%, at least about a 80%, at least about a 90%, at least about a 100%, at least about a 150%, at least about a 200%, at least about a 250%, at least about a 300%, at least about a 350%, at least about a 400%, at least about a 500% decrease as compared to control. In additional embodiments, the decrease is a statistically significant decrease as compared to a control.

#### iii. Fluorescence-Based Migration Assay

Another assay that can be used is a cellular migration assay. These assays assess cellular migration in a controlled environment, such as a differential migration of the cell-line, (or multiple cell-lines in a multiplex assay) as determined by fluorescent signals (such as the intensity of a fluorescent signal of a particular color, or at a particular wavelength, such as the emission maxima of a particular fluorescent protein) in a location that is associated with migration to a particular location.

A cellular migration assay can be used to determine the ability of cells to migrate up or down a chemical gradient. Migration "up" a chemical gradient refers to migration from a region of lower chemical concentration of a chemical to a region of higher chemical concentration (for example migration toward a higher concentration of a chemical attractant or

away from a lower concentration of the chemical attractant), while migration "down" a chemical gradient refers to migration from a region of higher chemical concentration to a region of lower chemical concentration (for example migration away from a higher concentration of a chemical repellent toward a lower concentration of the chemical repellent). Such migration is typically referred to as chemotaxis. Cells, such as fluorescent cell-lines, respond to chemical signals in their environment by the stimulation of concerted movement either toward a chemical attractant or away from a chemical repellent. In mammalian cells, such as fluorescent cell-lines, typical chemo-attractants include factors excreted by cells, for example factors found in serum, such as growth factors and the like.

Fluorescent cells (such as those described in U.S. applica- 15 tion Ser. No. 12/060,752 (published as US 2009/0088341 on Apr. 2, 2009)) can be used in any cell migration assay format, such as the ChemoTx<sup>TM</sup> system (NeuroProbe, Rockville, Md.), transwell system or any other suitable device or system. In some examples, a cell migration assay is carried out as 20 follows: A culture of a fluorescent cell-line of interest is placed into a first chamber of a cell migration apparatus, and an exogenous agent (such as a chemoattractant) is placed in a second chamber that is adjacent to and in communication with the first chamber of the cell migration apparatus, so that 25 cellular migration from the first chamber to the second chamber can be detected. The chambers may be separated by a membrane or filter that permits passage of cells from one chamber to the other chamber. The membrane or filter is configured such that the passive diffusion of the cells across 30 the membrane or filter is minimized. In one example, the first chamber is the upper chamber of the apparatus and the second chamber is the lower chamber of the apparatus. In some examples the upper chamber is omitted and the cells are placed directly on a membrane or filter in communication 35 with the lower chamber. The ability of a fluorescent cell-line such as the fluorescent cell-lines used in the assays described herein to be stimulated to migrate can be determined. Typical migration assays have "unknown" sites (with cell suspension above the filter and a solution containing the chemotactic 40 factor below it) and "negative control" sites (with cell suspension above the filter and suspension media, but no chemotactic factor, below). Random migration of unstimulated cells will account for some of the cells that pass through the filter. Migrated cells at the negative control sites show the extent of 45 unstimulated random migration, which can then be differentiated from chemotactic migration, or chemotaxis. Cells that stably express a fluorescent protein, such as the disclosed fluorescent cells can be read in a microplate with a fluorescence microplate reader. Thus, the number of fluorescent 50 cells present in either the upper chamber, lower chamber, or both chambers can be determined, for example as a function

Migration assays can be used to determine if an exogenous agent, such as a test agent, affects or differentially affects the migration of one or more of the fluorescent cell-line of interest. A fluorescent cell-line of interest can be contacted with exogenous agent and the impact of the exogenous agent on the migration of the fluorescent cell-line of interest can be determined. For example, a difference between the number of cells that migrate between a fluorescent cell-line of interest contacted with an exogenous agent and a control indicates that the exogenous agent, such as a test agent, cell-line, growth factor, etc., is a modulator of cellular migration. In other embodiments, differences in migration among different cell-lines in the migration assay provide an indication of differential migration of the different cell-lines in response to

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the exogenous agent. In some embodiments, the difference between the number of cells that migrate of the fluorescent cell-line contacted with an exogenous agent relative to a control, (for example as measured by the fluorescence intensity of a fluorescent protein stably and constitutively expressed by the cells) is at least about 10%, such as at least about 20%, at least about 30%, at least about 40%, at least about 50%, at least about 60%, at least about 70%, at least about 80%, at least about 90%, at least about 100%, at least about 150%, at least about 200%, at least about 250%, at least about 300%, at least about 350%, at least about 400%, at least about 500%, or greater than 500%. In some embodiments, the difference is a statistically significant difference. Thus, an exogenous agent can induce a statistically significant difference in the migration of a fluorescent cell-line of interest contacted with the exogenous agent, as compared to the control, such as the fluorescent cell-line of interest not contacted with the exogenous agent or a different cell-line that has been mixed with the cell-line of interest.

In one embodiment, the exogenous agent, such as a test agent, decreases the ability of a fluorescent cell-line of interest to migrate. A test agent with such an activity is identified as a potential inhibitor of angiogenesis and would be of use in treating a disease or condition in which normal angiogenesis is increased, for example cancer. In some embodiments, a decrease in migration of the fluorescent cell-line of interest is at least about a 30%, at least about a 40%, at least about a 50%, at least about a 70%, at least about a 80%, at least about a 90%, at least about a 100%, at least about a 150%, at least about a 250%, at least about a 400%, at least about a 300%, at least about a 350%, at least about a 360%, at least about a 350%, at least a

iv. Fluorescence-Based Cell Viability Assay

Another example of an assay is a cell viability assay. Such assays are based on the release of fluorescent protein from the cytoplasm of fluorescent cell-lines that constitutively express fluorescent protein that occurs when the integrity of the cell membrane of the cells is compromised, for example when the cell dies, such as when the cell is exposed to a cytotoxic agent, such as a test agent that is cytotoxic to the cell. Upon exposure to a cytotoxic agent the fluorescent protein is liberated to the culture media and it can be measured, for example using a fluorimeter. The greater the amount of fluorescent protein liberated from the cells present in the culture, the greater the intensity of the fluorescence present in the media. The measured fluorescence in the media corresponds to number of dead cells.

In some embodiments, the cell viability assay is used to determine if an exogenous agent, such as a test agent, is cytotoxic to one or more of the fluorescent cell-lines of interest, such as one or more of the fluorescent cell-lines disclosed herein. A fluorescent cell-line of interest can be contacted with exogenous agent and the impact of the exogenous agent on the death of the fluorescent cell-line of interest can be determined. For example, an increase in the relative florescence present in the media of between a fluorescent cell-line of interest contacted with an exogenous agent and a control indicates that the exogenous agent, such as a test agent, cellline, growth factor, etc., is cytotoxic to the cell-line of interest. In other embodiments, differential cytotoxicity of an exogenous agent to different cell-lines in the cell viability assay provides an indication that a specific exogenous agent is preferentially cytotoxic to one cell-line but not other celllines present in the culture. Such information is useful for screening agents that are preferentially or differentially cyto-

toxic to a specific cell-type, for example to the exclusion of other cell types. For example, in a mixed cell population a test agent could be screened to determine if it was cytotoxic (for example differentially cytotoxic) to diseased cells (such as tumor cells) present in the mixed cell population, but not 5 normal cells present in the mixed cell population.

In some embodiments, the difference between the fluorescence of the media of a fluorescent cell-line contacted with an exogenous agent relative to a control, (for example as measured by the fluorescence intensity of a fluorescent protein liberated from the cell-line into the media) is at least about 10%, such as at least about 20%, at least about 30%, at least about 40%, at least about 50%, at least about 60%, at least about 70%, at least about 80%, at least about 90%, at least about 100%, at least about 150%, at least about 200%, at least about 250%, at least about 300%, at least about 350%, at least about 400%, at least about 500%, or greater than 500%. In some embodiments, the difference is a statistically significant difference. Thus, an exogenous agent, such as a test agent, can induce a statistically significant difference in the number of 20 cells that die as a the migration of a fluorescent cell-line of interest contacted with the exogenous agent, as compared to the control, such as the fluorescent cell-line of interest not contacted with the exogenous agent or a different cell-line that has been mixed with the cell-line of interest.

#### v. Additional Angiogenesis Assays

The following descriptions provide additional examples of angiogenic assays, which may be useful in measurements of the angiogenic (or antiangiogenic) activity of a test compound, such as a compound structurally related to one of 30 Compounds 1-77 (TABLE 1), or a scaffold shown in any of TABLES 2-9, and derivatives thereof. In particular examples, these assays can also be used to measure the antiangiogenic activity of combinations of at least two SMs from Compounds 1-77 or combinations of at least one SM from Compounds 1-77 and an additional known or potential angiogenesis inhibitor. One of ordinary skill in the art will recognize that other angiogenic assays also can be used.

#### Corneal Pocket Assay:

This is the "gold standard" method for following the effect 40 of defined substances to promote neovascularization of the normally avascular cornea. This assay has the advantage that new blood vessels are easily detected and essentially must be newly formed blood vessels in the normally avascular cornea. Agents to be tested for angiogenic or anti-angiogenic activity 45 are immobilized in a slow release form in an inert hydron pellet of approximately 1-2 ul volume. That pellet is implanted into the corneal epithelium of an anesthetized C57BL mouse (or a rabbit) in a pocket created by microdissection. Over a five to seven day period angiogenic factors 50 stimulate the ingrowth of vessels from the adjacent vascularized corneal limbus. A photographic record is created by slit lamp photography. The appearance, density and extent of these vessels are evaluated and scored. In some cases, the time course of the progression is followed in anesthetized animals, 55 prior to sacrifice. Vessels are evaluated for length, density and the radial surface of the limbus from which they emanate (expressed as clock-faced hours).

Intradermal Sponge Angiogenesis Assay:

Inert biopolymer sponges impregnated with defined 60 amounts of test reagents are implanted subcutaneously through a transdermal incision, into a pocket created in the subcutaneous tissue. Sponges are then removed following a defined periods ranging from five to fifteen days and the new vessel formation quantitated by a number of biochemical and 65 histomorphometric parameters. Portions of a sponge can be extracted and analyzed by Western blot for endothelial

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restricted gene product such as VE cadherin, FLK-1 receptors, and others. Frozen section portions of that same sample are evaluated by immunohistochemistry for similar antigens to confirm that expression levels reflect endothelial cell proteins contained within new vessels that have invaded the sponge. In conjunction with the mouse corneal pocket assay, systemic administration of putative angiogenesis inhibitors by intraperitoneal or intravenous routes permits evaluation and comparison of the local effects of those inhibitors on angiogenic stimuli in different microvascular beds.

Chick Chorioallantoic Membrane (CAM) Assay:

Another assay involves the use of chicken chorioallantoic membrane (the CAM assay; see Wilting et al., *Anat. Embryol.* 183: 259, 1991). The CAM assay permits the quantitation of angiogenesis and anti-angiogenesis in the chick embryo chorioallantoic membrane (CAM). Briefly, chicken eggs are windowed on day two or three of incubation and the windows are sealed with tape, wax, glass slides, or PARAFILM® wrapper. On day eight of incubation, the windows are opened, and small sponges or pieces of gelatin are placed on top of the growing CAM.

After implantation, the sponges are treated with at least one stimulator orinhibitor (for example, any of Compounds 1-77) of blood vessel formation. Blood vessels growing vertically into the sponge and at the boundary between sponge and surrounding CAM mesenchyme are counted by a morphometric method on day twelve. Factors that increase the number of blood vessels growing into the sponge are considered angiogenic, whereas factors that inhibit blood vessel growth into the sponge are considered antiangiogenic. Quantification of the number of new vessels yields a measure of angiogenicity. Thus, this technique facilitates the characterization of agonists or antagonists of angiogenesis. (For more information, see Ribatti et al., *J. Vasc. Res.* 1997, 34:455-463).

Directed In Vivo Angiogenesis Assay (DIVAA):

Yet another angiogenesis assay is termed a Directed in vivo Angiogenesis Assay (DIVAA; Guedez et al., *American Journal of Pathology* 162(5):1431-9, 2003). Silicone tubes (0.15 mm outside diameter, New Age Industries, Southampton, Pa.) are cut to 1 cm in length, and one end of each tube is closed with liquid silicone and dried for 24 hours, then autoclaved. A dilution of test substances is prepared in matrigel in sterile cold Eppendorf tubes. Tubes are filled with a Hamilton syringe. Nude mice are anesthetized, and a pocket is made in the dorsal skin of each animal. The tubes are then implanted with the open end first and the wounds are sealed.

After nine to eleven days, the tail veins are injected with FITC-dextran to visualize the blood vessels, and the dye is allowed to distribute throughout the vasculature for about 20 minutes. Mice are then euthanized with  $\mathrm{CO}_2$  and the skin pockets are removed.

Skin is then dissected, keeping the vessels near the mouth of the tube. The matrigel is then displaced from the tube, incubated at 37° C. in the presence of dispase, then vortexed, centrifuged, and matrigel aliquots are transferred into 96-well plates for fluorescent emission. Fluorescence is read in a fluorimeter.

#### VII. Pharmaceutical Compositions and Modes of Administration

The compounds described herein (such as Compounds 1-77), and derivatives thereof, are particularly useful for inhibiting or reducing angiogenesis in a subject, such as a subject suffering from a disease or condition accompanied by deregulated angiogenesis. The methods of inhibiting or reducing angiogenesis include administering to a subject a

therapeutically effective amount of at least one agent identified as one that inhibits or reduces angiogenesis (e.g., any of Compounds 1-77, as described herein). Thus in some embodiments, the pharmaceutical composition containing a bioactive compound that decreases angiogenesis is administered to a subject, such as a subject with cancer or another disease or condition which would be treated by reducing angiogenesis. In some embodiments, the subject is a human subject. It is also contemplated that the pharmaceutical compositions containing at least one bioactive compound that decreases angiogenesis can be administered with known conventional treatments, for instance treatments for cancer, such as in conjunction with a therapeutically effective amount chemotherapeutic agent.

In particular embodiments, the pharmaceutical composi- 15 tion comprises at least one of 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), deoxybou-(NSC 259969), (2,5-dioxopyrrol-1-yl)methyl propanoate (NSC 19630), 1-benzylsulfonyl-2,4-dinitrobenzene (NSC 122657), maytansinol isobutyrate (NSC 292222), 20 chloroplatinum(1+); 2-(4-methylpiperidin-1-yl)ethanethiolate; dehydrate (NSC 292596), or a pharmaceutically acceptable salt thereof. The composition can also comprise any combination of two, three, four, five, or six of these compounds. In other particular embodiments, any of the 25 described compositions further comprise [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof. The combinations of the compounds can be determined based in part on the differential effect of each of the SMs in the combination on expression 30 of angiogenesis genes, as described in greater detail in Example 5.

Therapeutic compound(s) can be administered directly to a subject for example a human subject. Administration is by any of the routes normally used for introducing a compound 35 into ultimate contact with the tissue to be treated. The compounds are administered in any suitable manner, optionally with pharmaceutically acceptable carrier(s). Suitable methods of administering therapeutic compounds are available and well known to those of skill in the art, and although more 40 than one route can be used to administer a particular composition, a particular route can often provide a more immediate and more effective reaction than another route.

When the antiangiogenic compound is to be used as a pharmaceutical, it is placed in a form suitable for therapeutic 45 administration. The test agent (antiangiogenic compound) may, for example, be included in a pharmaceutically acceptable carrier such as excipients and additives or auxiliaries, and administered to a subject. Frequently used carriers or auxiliaries include magnesium carbonate, titanium dioxide, 50 lactose, mannitol and other sugars, talc, milk protein, gelatin, starch, vitamins, cellulose and its derivatives, animal and vegetable oils, polyethylene glycols and solvents, such as sterile water, alcohols, glycerol and polyhydric alcohols. Intravenous vehicles include fluid and nutrient replenishers. 55 Preservatives include antimicrobial, anti-oxidants, chelating agents and inert gases. Other pharmaceutically acceptable carriers include aqueous solutions, nontoxic excipients, including salts, preservatives, buffers and the like, as described, for instance, in Remington's Pharmaceutical Sci- 60 ences, 15th ed., Easton: Mack Publishing Co., 1405-1412, 1461-1487, 1975, and The National Formulary XIV, 14th ed., Washington: American Pharmaceutical Association, 1975). The pH and exact concentration of the various components of the pharmaceutical composition are adjusted according to 65 routine skills in the art. See Goodman and Gilman The Pharmacological Basis for Therapeutics, 7th ed.

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The pharmaceutical compositions are in general administered topically, intravenously, orally or parenterally or as implants. Suitable solid or liquid pharmaceutical preparation forms are, for example, granules, powders, tablets, coated tablets, (micro)capsules, suppositories, syrups, emulsions, suspensions, creams, aerosols, drops or injectable solution in ampoule form and also preparations with protracted release of active compounds, in whose preparation excipients and additives and/or auxiliaries such as disintegrants, binders, coating agents, swelling agents, lubricants, flavorings, sweeteners or solubilizers are customarily used as described above. The pharmaceutical compositions are suitable for use in a variety of drug delivery systems. For a brief review of methods for drug delivery, see Langer, *Science*, 249:1527-1533, 1990, which is incorporated herein by reference.

For treatment of a patient, depending on activity of the compound, manner of administration, nature and severity of the disorder, age and body weight of the patient, different daily doses are necessary. Under certain circumstances, however, higher or lower daily doses may be appropriate. The administration of the daily dose can be carried out both by single administration in the form of an individual dose unit or else several smaller dose units, and also by multiple administrations of subdivided doses at specific intervals.

A therapeutically effective dose is the quantity of a compound according to the disclosure necessary to prevent, to cure or at least partially ameliorate the symptoms of a disease and its complications. Amounts effective for this use will, of course, depend on the severity of the disease and the weight and general state of the patient. Typically, dosages used in vitro may provide useful guidance in the amounts useful for in situ administration of the pharmaceutical composition, and animal models may be used to determine effective dosages for treatment of particular disorders. Various considerations are described, e.g., in Gilman et al., eds., *Goodman and Gilman: the Pharmacological Bases of Therapeutics*, 8th ed., Pergamon Press, 1990; and *Remington's Pharmaceutical Sciences*, 17th ed., Mack Publishing Co., Easton, Pa., 1990. Effectiveness of the dosage can be monitored by any method.

The antiangiogenic compounds described herein may be formulated in a variety of ways depending on the location and type of disease to be treated or prevented. Pharmaceutical compositions are thus provided for both local use at or near an affected area and for systemic use (in which the agent is administered in a manner that is widely disseminated via the cardiovascular system). This disclosure includes within its scope pharmaceutical compositions including at least one antiangiogenic compound, formulated for use in human or veterinary medicine.

Pharmaceutical compositions that include at least one antiangiogenic compound as described herein as an active ingredient, or that include both an antiangiogenic compound and an additional anti-angiogenic agent, may be formulated with an appropriate solid or liquid carrier, depending upon the particular mode of administration chosen. Additional active ingredients include, for example, anti-angiogenic agents, such as inhibitors of bFGF or VEGF.

A suitable administration format may best be determined by a medical practitioner for each subject individually. Various pharmaceutically acceptable carriers and their formulation are described in standard formulation treatises, for example, *Remington's Pharmaceutical Sciences* by E. W. Martin. See also Wang and Hanson, *J. Parenteral Sci. Technol.*, Technical Report No. 10, Supp. 42: 2S, 1988.

The dosage form of the pharmaceutical composition will be determined by the mode of administration chosen. For instance, in addition to injectable fluids, inhalational, topical,

ophthalmic, peritoneal, and oral formulations can be employed. Inhalational preparations can include aerosols, particulates, and the like. In general, the goal for particle size for inhalation is about 1 µm or less in order that the pharmaceutical reach the alveolar region of the lung for absorption. 5 Oral formulations may be liquid (for example, syrups, solutions, or suspensions), or solid (for example, powders, pills, tablets, or capsules). For solid compositions, conventional non-toxic solid carriers can include pharmaceutical grades of mannitol, lactose, starch, or magnesium stearate. Actual 10 methods of preparing such dosage forms are known, or will be apparent, to those of ordinary skill in the art.

The compositions or pharmaceutical compositions can be administered by any route, including parenteral administration, for example, intravenous, intramuscular, intraperito- 15 neal, intrasternal, or intra-articular injection or infusion, or by sublingual, oral, topical, intra-nasal, ophthalmic, or transmucosal administration, or by pulmonary inhalation. When antiangiogenic compounds are provided as parenteral compositions, for example, for injection or infusion, they are 20 generally suspended in an aqueous carrier, for example, in an isotonic buffer solution at a pH of about 3.0 to about 8.0, preferably at a pH of about  $3.\overline{5}$  to about 7.4, 3.5 to 6.0, or 3.5to about 5.0. Useful buffers include sodium citrate-citric acid and sodium phosphate-phosphoric acid, and sodium acetate/ 25 acetic acid buffers. A form of repository or "depot" slow release preparation may be used so that therapeutically effective amounts of the preparation are delivered into the bloodstream over many hours or days following transdermal injection or delivery.

Antiangiogenic compounds are also suitably administered by sustained-release systems. Suitable examples of sustained-release formulations include suitable polymeric materials (such as, for example, semi-permeable polymer matrices in the form of shaped articles, for example, films, or mirocapsules), suitable hydrophobic materials (for example as an emulsion in an acceptable oil) or ion exchange resins, and sparingly soluble derivatives (such as, for example, a sparingly soluble salt). Sustained-release antiangiogenic compounds may be administered by intravascular, intravenous, intra-arterial, intramuscular, subcutaneous, intra-pericardial, or intra-coronary injection. Administration can also be oral, rectal, parenteral, intracisternal, intravaginal, intraperitoneal, topical (as by powders, ointments, gels, drops or transdermal patch), buccal, or as an oral or nasal spray.

Preparations for administration can be suitably formulated to give controlled release of antiangiogenic compounds. For example, the pharmaceutical compositions may be in the form of particles comprising a biodegradable polymer and/or a polysaccharide jellifying and/or bioadhesive polymer, an 50 amphiphilic polymer, an agent modifying the interface properties of the particles and a pharmacologically active substance. These compositions exhibit certain biocompatibility features that allow a controlled release of the active substance. See, for example, U.S. Pat. No. 5,700,486.

In some embodiments, antiangiogenic compounds are delivered by way of a pump (see Sefton, *CRC Crit. Ref. Biomed. Eng.* 14:201, 1987; Buchwald et al., *Surgery* 88:507, 1980; Saudek et al., *N. Engl. J. Med.* 321:574, 1989) or by continuous subcutaneous infusions, for example, using a 60 mini-pump. An intravenous bag solution may also be employed. The key factor in selecting an appropriate dose is the result obtained, as measured by increases or decreases in angiogenesis, or by other criteria for measuring control or prevention of disease, as are deemed appropriate by the practitioner. Other controlled release systems are discussed in the review by Langer (*Science* 249:1527-1533, 1990).

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In another aspect of the disclosure, antiangiogenic compounds are delivered by way of an implanted pump, described, for example, in U.S. Pat. No. 6,436,091; U.S. Pat. No. 5,939,380; and U.S. Pat. No. 5,993,414. Implantable drug infusion devices are used to provide subjects with a constant and long term dosage or infusion of a drug or any other therapeutic agent. Essentially, such device may be categorized as either active or passive.

Active drug or programmable infusion devices feature a pump or a metering system to deliver the drug into the patient's system. An example of such an active drug infusion device currently available is the Medtronic SynchroMed<sup>TM</sup> programmable pump. Such pumps typically include a drug reservoir, a peristaltic pump to pump the drug out from the reservoir, and a catheter port to transport the pumped out drug from the reservoir via the pump to a patient's anatomy. Such devices also typically include a battery to power the pump, as well as an electronic module to control the flow rate of the pump. The Medtronic SynchroMed<sup>TM</sup> pump further includes an antenna to permit the remote programming of the pump.

Passive drug infusion devices, in contrast, do not feature a pump, but rather rely upon a pressurized drug reservoir to deliver the drug. Thus, such devices tend to be both smaller as well as cheaper as compared to active devices. An example of such a device includes the Medtronic IsoMed<sup>TM</sup>. This device delivers the drug into the patient through the force provided by a pressurized reservoir applied across a flow control unit.

The implanted pump can be completely implanted under the skin of a subject, thereby negating the need for a percutaneous catheter. These implanted pumps can provide the patient with antiangiogenic compounds at a constant or a programmed delivery rate. Constant rate or programmable rate pumps are based on either phase-change or peristaltic technology. When a constant, unchanging delivery rate is required, a constant-rate pump is well suited for long-term implanted drug delivery. If changes to the infusion rate are expected, a programmable pump may be used in place of the constant rate pump system. Osmotic pumps may be much smaller than other constant rate or programmable pumps, because their infusion rate can be very low. An example of such a pump is described listed in U.S. Pat. No. 5,728,396.

For oral administration, the pharmaceutical compositions can take the form of, for example, tablets or capsules prepared by conventional means with pharmaceutically acceptable excipients such as binding agents (for example, pregelatinised maize starch, polyvinylpyrrolidone or hydroxypropyl methylcellulose); fillers (for example, lactose, microcrystalline cellulose or calcium hydrogen phosphate); lubricants (for example, magnesium stearate, talc or silica); disintegrants (for example, potato starch or sodium starch glycolate); or wetting agents (for example, sodium lauryl sulphate). The tablets can be coated by methods well known in the art. Liquid preparations for oral administration can take the form of, for example, solutions, syrups or suspensions, or they can be presented as a dry product for constitution with water or other suitable vehicle before use. Such liquid preparations can be prepared by conventional means with pharmaceutically acceptable additives such as suspending agents (for example, sorbitol syrup, cellulose derivatives or hydrogenated edible fats); emulsifying agents (for example, lecithin or acacia); non-aqueous vehicles (for example, almond oil, oily esters, ethyl alcohol or fractionated vegetable oils); and preservatives (for example, methyl or propyl-p-hydroxybenzoates or sorbic acid). The preparations can also contain buffer salts, flavoring, coloring, and sweetening agents as appropriate.

For administration by inhalation, the compounds for use according to the present disclosure are conveniently delivered

in the form of an aerosol spray presentation from pressurized packs or a nebulizer, with the use of a suitable propellant, for example, dichlorodifluoromethane, trichlorofluoromethane, dichlorotetrafluoroethane, carbon dioxide or other suitable gas. In the case of a pressurized aerosol, the dosage unit can be determined by providing a valve to deliver a metered amount. Capsules and cartridges for use in an inhaler or insufflator can be formulated containing a powder mix of the compound and a suitable powder base such as lactose or starch.

For topical administration, the compounds for use are, for example, mixed with ethanol, methanol, propylene glycol, or dimethyl sulfoxide, which act as a vehicle to facilitate uniform distribution of the compound to a target area of the subject's body, such as a wound or decubitus ulcer.

Pharmaceutical compositions that comprise an antiangiogenic compound as described herein as an active ingredient will normally be formulated with an appropriate solid or liquid carrier, depending upon the particular mode of administration chosen. The pharmaceutically acceptable carriers 20 and excipients useful in this disclosure are conventional. For instance, parenteral formulations usually comprise injectable fluids that are pharmaceutically and physiologically acceptable fluid vehicles such as water, physiological saline, other balanced salt solutions, aqueous dextrose, glycerol or the like. 25 Excipients that can be included are, for instance, proteins, such as human serum albumin or plasma preparations. If desired, the pharmaceutical composition to be administered may also contain minor amounts of non-toxic auxiliary substances, such as wetting or emulsifying agents, preservatives, 30 and pH buffering agents and the like, for example sodium acetate or sorbitan monolaurate. Actual methods of preparing such dosage forms are known, or will be apparent, to those skilled in the art.

For example, for parenteral administration, antiangiogenic compounds can be formulated generally by mixing them at the desired degree of purity, in a unit dosage injectable form (solution, suspension, or emulsion), with a pharmaceutically acceptable carrier, for instance, one that is non-toxic to recipients at the dosages and concentrations employed and is compatible with other ingredients of the formulation. A pharmaceutically acceptable carrier is a non-toxic solid, semisolid or liquid filler, diluent, encapsulating material or formulation auxiliary of any type.

Generally, the formulations are prepared by contacting the 45 antiangiogenic compounds each uniformly and intimately with liquid carriers or finely divided solid carriers or both. Then, if necessary, the product is shaped into the desired formulation. Optionally, the carrier is a parenteral carrier, and in some embodiments it is a solution that is isotonic with the 50 blood of the recipient. Examples of such carrier vehicles include water, saline, Ringer's solution, and dextrose solution. Non-aqueous vehicles such as fixed oils and ethyl oleate are also useful herein, as well as liposomes.

The pharmaceutical compositions that comprise an antiangiogenic compound, in some embodiments, will be formulated in unit dosage form, suitable for individual administration of precise dosages. The amount of active compound(s) administered will be dependent on the subject being treated, the severity of the affliction, and the manner of administration, and is best left to the judgment of the prescribing clinician. Within these bounds, the formulation to be administered will contain a quantity of the active component(s) in amounts effective to achieve the desired effect in the subject being

The therapeutically effective amount of antiangiogenic compound will be dependent on the specific compound uti86

lized, the subject being treated, the severity and type of the affliction, and the manner of administration.

#### VII. Therapeutic Uses

Methods are disclosed herein for inhibiting angiogenesis in a subject (or in an area in a subject) who has or is at risk for developing, for instance, a tumor (whether malignant or benign), retinopathy, psoriasis, endometriosis, arthritis, or any other disease for which it would be beneficial to inhibit angiogenesis. The methods include introducing a therapeutically effective amount of an antiangiogenic compound (e.g., one of Compounds 1-77) to the area (or systemically), thereby inhibiting angiogenesis in the subject.

In one embodiment, the angiogenesis inhibitory compound is administered locally. For subjects with a tumor, administration may be, for example, by intra-arterial injection to the tumor's arterial supply, or by direct injection into the tumor. Other routes of administration will be determined by the tumor location. Ovarian tumors are, for example, treated by intraperitoneal washing with the inhibitor. A brain tumor is, for example, treated by intra-arterial or intrathecal injection, by intranasal administration, by direct injection of affected brain areas, or by intravenous or intra-arterial injection following osmotic disruption of the blood brain barrier (see, for example, U.S. Pat. No. 5,124,146). Lung cancer is treated, for example, by direct injection of the tumor, by inhalation, or infusion into the lobar circulation of an affected lobe of the lung. Efficacy of the treatment is determined, for example, by monitoring tumor burden, or is indicated, for example, by a lessening of symptoms, such as pain.

For subjects with retinopathy, administration is, for example, by intra-ocular injection (for example, into the posterior chamber of the eye), or by topical ophthalmic administration. Alternatively, the agent may be administered intravascularly, for example into the vascular supply for the retinal artery. Efficacy of the treatment is determined, for example, by an improvement in vision, by a stabilization of vision, by a lack of new blood vessel formation in the retina, or by failure of the disease to progress.

For subjects with psoriasis, administration is, for example, by subcutaneous or intravenous injection, or by topical application. Efficacy of the treatment is determined, for example, by an abatement of psoriasis symptoms. For subjects with arthritis, administration is, for example, by intra-articular injection. Efficacy of the treatment is monitored, for example, by detecting an improvement in mobility, or a lessening of joint pain. For subjects with endometriosis, administration is, for example, by direct injection of the endometrial growths, or by intraperitoneal washing with the antiangiogenic compound. Efficacy of the treatment is shown, for example, by an improvement in mobility, or a lessening of pelvic pain.

Administration of the angiogenesis inhibitor may begin whenever a subject has developed, or is at risk for developing a tumor, retinopathy, psoriasis, or endometriosis, or when symptoms of inappropriate neovascularization are present.

Also disclosed are methods for treating undesirable angiogenesis and angiogenesis dependent or associated diseases, in a subject. The method includes administering one or more of the presently described compounds, or a combination of one or more of the compounds and one or more other pharmaceutical agents, to the subject in a pharmaceutically compatible carrier. The administration is made in an amount effective to inhibit the development or progression of angiogenesis and diseases associated with the same. Although the treatment can be used prophylactically in any patient in a demographic

group at significant risk for such diseases, subjects can also be selected using more specific criteria, such as a definitive diagnosis of the condition.

The vehicle in which the drug is delivered can include pharmaceutically acceptable compositions of the drugs, using methods well known to those with skill in the art. Any of the common carriers, such as sterile saline or glucose solution, can be utilized with the drugs disclosed herein. Routes of administration include but are not limited to oral and parenteral routes, such as intravenous (iv), intraperitoneal (ip), rectal, topical, ophthalmic, nasal, and transdermal.

The drug may be administered in a suitable manner now known or later developed, e.g., orally or intravenously, in any conventional medium. For example, intravenous injection may be by an aqueous saline medium. The medium may also contain conventional pharmaceutical adjunct materials such as, for example, pharmaceutically acceptable salts to adjust the osmotic pressure, lipid carriers such as cyclodextrins, proteins such as serum albumin, hydrophilic agents such as methyl cellulose, detergents, buffers, preservatives and the like. A more complete explanation of parenteral pharmaceutical carriers can be found in *Remington: The Science and Practice of Pharmacy* (19<sup>th</sup> Edition, 1995) in chapter 95.

Examples of other pharmaceutical compositions can be 25 prepared with conventional pharmaceutically acceptable carriers, adjuvants and counterions as would be known to those of skill in the art. The compositions are preferably in the form of a unit dose in solid, semi-solid and liquid dosage forms such as tablets, pills, powders, liquid solutions or suspensions.

The compounds illustrated herein are ideally administered as soon as possible after unwanted angiogenesis is detected. For example, once unwanted angiogenesis has been confirmed or the presence of a tumor has been identified, a 35 therapeutically effective amount of the drug is administered. The compound(s) can be administered in a single dose, or in multiple doses, for example daily, weekly, every two weeks, or monthly during a course of treatment.

Therapeutically effective doses of the presently described 40 compounds can be determined by one of skill in the art, with a goal of achieving a desired level of antiangiogenesis as illustrated in the foregoing examples. In one embodiment, an antiangiogenic effective amount is an amount sufficient to achieve a statistically significant inhibition of angiogenesis compared to a control. Angiogenesis can be readily assessed using an assay, e.g., any of the assays described herein. Alternatively, angiogenesis can be determined in another assay or by direct or indirect signs of angiogenesis in a patient.

The relative toxicities of the compounds make it possible to administer in various dosage ranges. An example of such a dosage range is from about 0.5 to about 50 mg/kg body weight orally in single or divided doses. Another example of a dosage range is from about 1.0 to about 25 mg/kg body weight orally in single or divided doses. For oral administration, the compositions are, for example, provided in the form of a tablet containing from about 25 to about 500 mg of the active ingredient, particularly 100 mg of the active ingredient for the symptomatic adjustment of the dosage to the subject being treated.

The specific dose level and frequency of dosage for any particular subject may be varied and will depend upon a variety of factors, including the activity of the specific compound, the extent of existing angiogenic activity, the age, body weight, general health, sex, diet, mode and time of 65 administration, rate of excretion, drug combination, and severity of the condition of the host undergoing therapy.

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The pharmaceutical compositions containing at least one of the antiangiogenic SMs described herein can be used in the treatment of a variety of diseases mediated by angiogenesis. Examples of such angiogenesis-dependent diseases include all types of cancer, ocular neovascular disease, tumor formation and metastasis in tumors such as myeloma, rhabdomyosarcomas, retinoblastoma, Ewing sarcoma, neuroblastoma, osteosarcoma, colon, prostate, head and neck, breast, bladder, liver, pancreatic, lung, CNS, and blood-born tumors such as leukemia, also diseases such as hemangioma, ulcerative colitis, Crohn's disease, diabetic retinopathy, macular degeneration, sickle cell anemia, sarcoid, syphilis, pseudoxanthoma elasticum, Paget's disease, vein occlusion, artery occlusion, carotid obstructive disease, chronic uveitis/vitritis, mycobacterial infections, Lyme's disease, systemic lupus erythematosis, retinopathy of prematurity, Eale's disease, Bechet's disease, infections causing a retinitis or choroiditis, presumed ocular histoplasmosis, Best's disease, myopia, optic pits, Stargart's disease, pars planitis, chronic retinal detachment, hyperviscosity syndromes, toxoplasmosis, trauma and postlaser complications. Other diseases include, but are not limited to, diseases associated with rubeosis (neovasculariation of the angle) and diseases caused by the abnormal proliferation of fibrovascular or fibrous tissue including all forms of proliferative vitreoretinopathy.

Also disclosed herein are combinations of one or more of the presently described compounds with one or more of various other angiogenesis inhibitor compounds. For example, the presently described compounds may be administered in combination with effective doses of other antiangiogenic agents. The term "administration in combination" refers to both concurrent and sequential (in either order) administration of the active agents. Non-limiting examples of antiangiogenic agents that can be used in combination with the compounds indentified herein are TNP-470, carbonic anhydrase inhibitors, endostatin, angiostatin, 2-methoxyestradiol, IMiD (Immune-modulating inhibitor drug) CC5013, matrix metalloproteinase inhibitors, and COL-3, as well as bFGF or VEGF inhibitor, such as SU5416, which is a specific VEGF-R antagonist, and SU6668 which blocks the receptors for VEGF, bFGF, and PDGF (see, for example, Liu et al., Seminars in Oncology 29 (Suppl 11): 96-103, 2002; Shepherd et al., Lung Cancer 34:S81-S89, 2001). In addition, the presently described compounds may be used in combination with other forms of cancer therapy (e.g., chemotherapy, radiation therapy, hormonal therapy) or other therapies known for use with angiogenesis-related disorders and diseases.

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#### **EXAMPLES**

### Example 1

## Antiangiogenic Small Molecule Signatures

This example describes the identification and initial characterization of antiangiogenic small molecules using cellbased HTS methodology.

The present disclosure relates to the discovery of a new set of antiangiogenic small molecules. The antiangiogenic small 25 molecules were identified through a combination of cellbased high throughput screening (HTS) together with chemoinformatic tools. This approach differs from the one taken by previous studies and pharmaceutical companies, in that the HTS is not targeted to a single subcellular molecule but 30 instead targets a whole cellular process. In particular, two cell based assays have been developed which represent the two most important steps in angiogenesis: endothelial cell growth and tube formation.

Using the cell-based HTS screen, a new set of antiangio- 35 genic small molecules have been discovered. Structure-activity-relationship (SAR) studies have shown that most of these new bioactive SMs are not related to known antiangiogenic SMs (FDA marketed; SMs currently in clinical trials; SMs annotated as antiangiogenic in chemical databases such as 40 LeadScope, DrugBank, PubChem, etc.).

Overview of High Throughput Screen

The small molecule library screened was the NCI Diversity Set I (available on-line at dtp.nci.nih.gov/branches/dscb/di-DTP/NCI (available on-line at dtp.nci.nih.gov/). This library contains 1974 small molecules (SMs) which are representative members of the same number of structural families each containing a variable number of members. The SMs included in the NCI Diversity Set I were selected to summarize the 50 structural diversity found in a library of approximately 72,000 SMs. The library was obtained in 96-well plates and plate-to-plate DMSO dilutions were prepared at a stock concentration of 200 µM.

Two different cell-based HTS assays were developed 55 which mimic the two main steps of the angiogenesis process: (1) a growth assay and (2) a tube formation assay (see below for more detail on assay protocols). The primary goal of the two HTSs was to find SMs which block either growth or tube formation of endothelial cells. These two assays comprised 60 the primary screening which defined a first group of "bioactive compounds" which were then evaluated with secondary screening. See FIG. 1.

The secondary screening included two steps: (1) a cytotoxicity assay (described below) which was designed to discrimi- 65 nate cytotoxic compounds and (2) calculation of IC50 for every of the compounds identified in the primary screening.

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This secondary screening was also designed to eliminate putative false positives found in the primary screening and to evaluate the potency of the bioactive compounds. See FIG. 1.

The set of biologically active compounds obtained after the secondary screening was then used in a number of chemoinformatic studies as well as in in vitro studies in order to partially characterize their mechanism of action as well as compare them with existing antiangiogenic small molecules currently approved by the FDA, or in development by pharmaceutical companies.

Based on the compiled results of the HTS and other in vitro assays, a small set of compounds was chosen for in vivo studies. These studies included primarily xenograft experiments (See Example 2) and were designed to confirm the 15 antiangiogenic activity of the compounds of interest, as well as test innovative anti-tumor/anti-angiogenic drug-combination regimens.

Experimental Design for HTS

FIG. 2 illustrates the basic experimental design for all HTS assays; the same scheme was applied to both growth and tube formation assays. All assays were performed in clear bottom black 96-well plates. The plates were always arranged to include a column for negative controls (column 1), a column for positive controls (column 12), and 10 columns for evaluation of 80 compounds. In order to increase stringency and avoid false positives in the HTS assays, all compounds were tested at a low final concentration of 1 µM.

Both HTS assays (growth and tube formation) were based on the use of fluorescent reporter cell lines, essentially as described in U.S. application Ser. No. 12/060,752 (published as US 2009/0088341 on Apr. 2, 2009; incorporated herein by reference in its entirety). In summary, the cell lines porcine aortic endothelial cell (PAE), BEC (a human microvascular endothelial cell line), HMEC-1 (human microvascular endothelial cell line), A549 (human adenocarcinoma from the lung) and MCF7 (breast cancer cell line), among others, were stably transfected with different fluorescent proteins (green fluorescent protein -GFP-, yellow fluorescent protein -YFP-, red fluorescent protein -RFP-, and blue fluorescent protein -BFP-). Details on the production of these cell lines are described in U.S. application Ser. No. 12/060,752, which published as US 2009/0088341 on Apr. 2, 2009.

Growth HTS:

Previously, we demonstrated that there is a linear correlaversity\_explanation.html). The library was obtained from 45 tion between the fluorescence emission of the reporter cell lines and their number in culture. In summary, 1,000 cells/ well were seeded in the 96-well plates described above. Cells in columns 2-12 were seeded in 10% FBS and cells in column 1 (negative control) were seeded in 0% FBS Small molecules (80 per plate) were added in columns 2-11 at a final concentration of 1 µM (both positive and negative controls were exposed to the same percentage of DMSO in wells containing test compounds). The fluorescence emitted by every well was measured spectrophotometrically (Infinite M200, TECAN®, Mannedorf, Switzerland) every 24 hours for 5-7 days. The assay quality was evaluated y calculating the Z' score (Zhang et al., J. Biomol. Screen 4(2):67-73, 1999) for every plate (only plates with Z'>0.5 were considered).

Tube Formation HTS:

In summary, 20,000 cells/well were seeded on top of 50 μl of pre-gelled GELTREX® gel matrix (Invitrogen, Carlsbad, Calif.). All cells were seeded in 10% FBS. Cells in column 1 (negative control) were exposed to 25 µM of suramine (an antiangiogenic factor known to be an inhibitor of endothelial tube formation). Small molecules (80 per plate) were added to columns 2-11 at a final concentration of 1 µM (both positive and negative controls were exposed to the same percentage of

DMSO in wells containing test compounds). Plates were incubated for 5-7 hours and automatically imaged with the help of an epifluorescence microscope (Axiovert® 200M, Zeiss) equipped with a motorized stage and AxioVision® (Zeiss) software. Images were analyzed with the AngioApplication<sup>TM</sup> software (see below).

Hit Detection:

Data obtained from both the growth and tube formation HTSs were processed with the HTS Corrector software (Makarenkov et al., *Bioinformatics* 23(11):1408-0409, 10 2007). Data were normalized using "well correction" (Makarenkov et al., *Bioinformatics* 23(13):1648-1657, 2007) and hit identification was achieved using clustering by "sum of the average squared inside-cluster distances" (Gagarin et al., *J. Biomol. Screen* 11(8):903-914, 2006). For hit detection, 15 a stringent threshold (sigma 3.5) was applied to avoid false positives.

Results of HTS Growth Assay

FIG. 3 shows the results on one the plates (4143-11) included in the growth HTS using PAE cells. The plot repre- 20 sents fluorescence emission of all 96 wells over 7 days. As expected, fluorescence values increase over time although different wells show different fluorescence values. A composite image of all 96 wells is also shown (at day 4 of growth). Positive controls are shown in the far right column of wells; as 25 expected, these controls show maximum values of fluorescence (in the plot) and high density of cells in the wells. A negative control is shown in the left column of wells; these show low fluorescence values in the plot and low cell density in the wells. Additionally, an example of a compound which 30 blocks growth of PAE is shown in the first row, fourth column from the left, with low fluorescence values and few cells in the well. Furthermore, an example of a compound which does not inhibit the growth of PAE is shown in the seventh row, fourth column. In this case, high fluorescence values are shown in 35 the plot together with a high number of cells in the well. Growth HTS Summary

Following the same protocol, HTS growth experiments were performed for PAE, BEC, A549 and MCF7 cells. These experiments were designed to explore the specificity of SMs 40 with inhibitory activity in endothelial cells as compared to tumor cells from different anatomical origins.

FIG. 4 shows a heatmap that summarizes obtained results. The heatmap was constructed using the function heatmap.2 of the package gplots of the R statistical software. Clustering was performed using Euclidean distance matrix. The X axis shows the 1974 SM tested and the Y axis represents some of the growth HTS experiments performed. For all experiments measurements obtained in different days have been included and as expected show a high degree of consistency. Dark blue cells in the heatmap represent SM with strongest growth inhibitory activity and green and yellow SM with no activity on growth.

As expected, a small percentage of the SMs in the library had an inhibitory effect on the different cell lines. Interestingly, the majority of SMs shown to block growth of endothelial cells also inhibited the growth of tumor cells. Statistical analysis of these data identified 48 SMs which consistently inhibited the growth of endothelial cells (see TABLE 10). Comparison of Growth Inhibitory Activity in Endothelial 60 Cells vs. Tumor Cells

In the heatmap shown in FIG. 4, it is difficult to distinguish the SMs which preferentially inhibit the growth of endothelial cells or tumor cells. In order to study this possibility, average growth activity values for endothelial cells and tumor cells were compared in a bivariate scatterplot. Most of the SMs do not have an effect in growth in any of the cell lines tested and

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cluster in the center of the scatterplot (indicated within the middle-sized oval at the center of the plot). Also, most SMs with growth inhibitory activity affected with similar potency to tumor cells and endothelial cells and cluster in the lower left quadrant (indicated within the largest oval). Interestingly, a few SMs showed growth inhibitory activity in tumor cells but not in endothelial cells (small oval; see also TABLE 10). Growth activity of these small molecules is shown in the adjacent plot (small molecules are identified by their position in the plate; TABLE 10 correlates plate position to NSC number). No SMs were found with specific inhibitory activity for endothelial cells.

Specificity in the growth inhibitory activity of SMs is an important feature in the context of combinatorial drug therapy. In the treatment of angiogenesis-dependent tumors it is likely important to first deliver drugs that inhibit tumor growth but do not affect endothelial cells in order to not damage the vasculature which serves as drug delivery conduit to effectively reach the tumor. Therefore, drugs like the ones found in this study with the ability of specifically inhibit tumor growth but not endothelial cell growth would be of great value. Once the tumor has been significantly reduced, drugs with inhibitory activity in both tumor cells and endothelial cells would be preferred since both tumor cells and endothelial cells need to be targeted. A number of such drugs have also been found in this study (see TABLE 10).

Half Maximal Inhibitory Concentration (IC<sub>50</sub>) in PAE

Dose response curves were constructed for all the SM of interest using PAE cells.

Data were fitted to non-linear sigmoid curves using Graph-Pad Prism (GraphPad software, Inc.). This assay was designed as a multipurpose experiment aimed to: (1) confirm bioactivity of SMs of interest, (2) confirm dose response of the growth inhibitory activity, and (3) calculate the half maximal inhibitory concentration (IC50). Since the initial screening was performed using a final SM concentration of 1  $\mu\text{M}$ , IC50 form most compounds were confirmed to be in the range of  $10^{-12}$  to  $10^{-9}$  M (FIG. 6). This confirms that all the SMs discovered in this project show high growth inhibitory potency in endothelial cells (see TABLE 10).

Cytotoxicity Assay

does not provide information on whether the identified bioactive compounds inhibit growth through cell toxicity. Cytotoxicity is a common problem associated with non-peptidic small molecule drugs. In order to explore the cytotoxic potential of the SMs of interest, a novel high throughput cytotoxicity assay was previously developed (U.S. application Ser. No. 12/060,752; published as US 2009/0088341 on Apr. 2, 2009). The assay is based on the fact that cytotoxicity involves damage to the cell membrane which results in release of cytoplasmic content to the cell milieu. Since the reporter fluorescent cells used herein constitutively synthe-

Evaluation of the results obtained in the HTS growth assay

size fluorescent cens used herein constitutively synthesize fluorescent proteins which are present in the cytoplasm, liberation of fluorescence to the medium can be used as an assessment of cytotoxicity.

FIG. 7 shows two different hypothetical outcomes of the cytotoxicity assay. In the lower area of the diagram, fluores-

cytotoxicity assay. In the lower area of the diagram, fluorescent cells are exposed to a cytotoxic substance, which results in the liberation of florescence to the cell culture medium. Both the fluorescence in the medium and the remaining fluorescence in the cells can be quantitated and used to determine percentage of cytotoxicity using the formula in the lower are of the figure. The plot shows the expected dose response curve

when Triton X is used as cytotoxic agent on PAE cells. FIG. **8** shows an example of four compounds with growth inhibitory activity from which two present a strong and mod-

erate cytotoxic activity respectively. Using this cytotoxicity assay four compounds were identified as cytotoxic (see TABLE 10). Although these cytotoxic compounds may be of clinical interest, they were excluded from consideration for subsequent in vivo experiments.

### Tube Formation

A HTS tube formation assay was also used for evaluation of antiangiogenic compounds. After being seeded, the endothelial cells are homogeneously distributed on the matrigel. Over time, cells migrate and interact with other endothelial cells to form tube-like structures which mimic the vasculature in vivo. Tube formation recapitulates several key steps of the angiogenic process: endothelial cell activation, cell migration, matrix degradation, cell polarization, cell to cell interaction and tube formation (among others).

Data Analysis using AngioApplication<sup>TM</sup>

The major obstacle that was encountered in adapting the tube formation assay to a HTS format was performing a morphological quantitative analysis of the tube formation. For that purpose, an image analysis program named Angio-20 Application™ was developed (described in detail in U.S. application Ser. No. 12/060,752; published as US 2009/0088341 on Apr. 2, 2009). This software (FIG. 9) is able to rapidly assess a variety of metrics in images of tube formation including (but not limited to) tube length, node area, branching points, fractal dimension and lacunarity.

In order to understand which one of those metrics better explained the variability of the HTS tube formation assay data, a principal component analysis (PCA) was run. The PCA showed that branching index (the number of branches 30 which converge in each node) and lacunarity (the average area of the empty spaces left by the tubes in the images) explain 53.8% and 45.0% respectively of the variability of the data (components C1 and C2 in the plots below) (see FIG. 10), making them the most appropriate metrics to measure 35 tube formation.

Both emptiness (C1) and branching index (C2) were plotted in a bivariate scatter plot for every SM tested. The Euclidean distance between the average of the positive controls and every SM was used as metric to define anti-tube formation 40 activity (calculations were done separately for every plate). In essence, compounds which are further away from the positive controls are more likely to be antiangiogenic. FIG. 11 illustrates the results from all the SMs in one test plates. As expected, most of the compounds (small squares clustered in 45 center of graph) are located closely to the positive controls (large squares clustered near center of graph); this cluster is due to the fact that most small molecules do not have an effect on tube formation and therefore show similar branching index and emptiness values. In contrast, the negative controls (large 50 squares clustered in lower right corner of graph) are positioned farther away from the positive controls. Representative images of the positive and negative controls are shown. Tube formation inhibitory compounds are detected as being

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located at an intermediate distance between the positive controls and the negative controls. A representative image of an active SM is shown (FIG. 11).

35 out the 1974 compounds in the library (1.75%) were found to statistically significantly inhibit tube formation (see TABLE 10).

Dose Response of NSC 119889 in Tube Formation Assay

IC50 were calculated for all tube formation inhibitor SMs. As expected, most IC50 were in the range of  $10^{-9}$  to  $10^{-12}$ M, making these compounds highly effective tube formation inhibitors. FIG. 12 shows an example of the dose response generated with compound NSC 119889. Results of Screen and Analysis

FIG. 13 summarizes the results obtained in the growth and tube formation HTS for endothelial cells (for information on specific compounds, see TABLE 10). 2.4% (48) of the compounds were growth inhibitors and 1.75% (35) were tube formation inhibitors. Interestingly, 0.5% (11) of the compounds showed both growth and tube formation inhibitory activity. These SMs are especially interesting from the perspective of network pharmacology. It has been suggested that exquisitely selective compounds, compared with multitarget drugs, may exhibit lower than desired clinical efficacy (Hopkins, *Nat. Chem. Biol.* 4(11):682-690, 2008). However, it is challenging to design multitarget drugs while maintaining their drug-like properties. Here we have identified 11 SMs which show both growth and tube formation inhibitory activity (see TABLE 10).

Structure-Based Analysis

The structures of the antiangiogenic SMs identified herein were compared with annotated compounds in available annotated SM databases such as PubChem, DrugBank, LeadScope and FDA Marketed Drugs among others. Structural classifications were performed with LeadScope software. Only a few of our SMs were structurally related to annotated compounds in other databases (numbers in parenthesis in FIG. 14). This can be explained by the novel drug discovery methodology utilized in this project, which, as expected, results in novel SARs discoveries. Particularly interesting is the fact that none of the antiangiogenic SMs discovered herein are structurally related to any of the known antiangiogenic SMs. This supports the novelty of these newly-discovered antiangiogenic SMs and emphasizes that new SARs will result in exploitation of new cellular antiangiogenic pathways.

One of the areas for future work in this project is the identification of specific mechanisms of action for the newly-discovered antiangiogenic SMs. Some progress has already been achieved by applying Tanimoto's similarity algorithm (40-80% similarity) to compare the SMs described herein with SMs with known mechanism of action (Fligner et al., *Technomet*, 110-19, 2002. The structure of 12 compounds was found to be compatible with a potential mechanism of action (noted in parenthesis in "Mechanism of Action" in TABLE 10).

TABLE 10

BIOACTIVE SMALL MOLECULES							
Compound	Location in Plate	NSC Numbers	Bioactivity	Cytotoxicity (%)	Growth IC50 (M) in PAE	Apoptosis PAE (RFU)	Mechanism of Action
1	4125_G10	329226	1	7.564570142	3.719E-10	2.63432836	
2	4127_D3	15234	1	7.734030998	1.106E-10	0.70335821	
3	4127_E3	15226	1	9.013157895	>1.00E-06	0.81599813	
4	4127_E6	24076	1	7.346874506	>1.00E-06	0.6823694	
5	4127_E11	26081	1	7.103315772	>1.00E-06	0.67490672	
6	4130_D6	133896	1	6.968579807	5.77E-10	0.68983209	
7	4131_C11	675865	1	7.322550338	1.118E-11	1.63945896	

TABLE 10-continued

			1, 100				
			BIOACTIVE	SMALL MOLECU	LES		
Compound	Location in Plate	NSC Numbers	Bioactivity	Cytotoxicity (%)	Growth IC50 (M) in PAE	Apoptosis PAE (RFU)	Mechanism of Action
8	4131_E10	10460	1	8.512827087	>1.00E-06	0.85797575	
9	4132_D9	207895	1	7.69900465	2.297E-10	0.98763993	Tubulin Binder (80)
10	4133_H4	99445	1	6.79005243	>1.00E-06	1.05550373	DNA synthesis inhibitor (80)
11	4133_H10	88903	1	18.69722406	2.366E-11	0.90298507	imilater (66)
12	4134_A8	177407	1	6.734835623	3.016E-10	1.66487873	
13	4135_D8	123111	1	7.062612517	1.65E-11	0.96338619	Alkylating agent (40)
14	4136_F10	329261	1	6.510813456	1.885E-09	0.93913246	
15	4137_C5	13316	1	7.93334652	6.552E-10	0.93516791	
16	4137_G3	5844	1	6.779904279	>1.00E-06	0.90578358	
17	4138_C3	5857	1	7.344979376	3.979E-10	2.10704291	
18	4138_E2	656202	1	7.599327541	4.635E-10	1.5886194	
19 20	4138_G2	2186	1	6.564555483	9.626E-10	1.34001866	Tubulla blada
	4138_H7	97845	1	8.180294654	4.684E-09		Tubulin binder (80)
21	4139_H6	368891	1	6.565516968	2.291E-11	0.96805037	
22	4140_A3	126710	1	6.745211776	1.535E-12	1.22807836	
23 24	4140_C2 4140 D11	109836 67485	1	7.015392379 8.537374177	1.207E-09 >1.00E-06	0.82649254 1.37546642	
24 25	4140_D11 4140_E9	47932	1 1	9.566749391	2.267E-10	1.43283582	Antifuncal
							(60)
26	4141_F2	176327	1	8.243912666	8.379E-11	2.6798041	
27	4141_F6	48630 71669	1	7.89544627	>1.00E-06	0.95895522	
28	4141_G8		1	8.645721955 9.782711919	7.412E-11 >1.00E-06	1.34025187	
29 30	4142_E8 4143_A4	150289 311153	1 1	8.808756865	9.265E-10	0.97504664 0.63899254	
31	4143_A9	45238	1	7.617204067	0.0005062	1.23763993	
32	4143_C6	156305	1	6.821926473	>1.00E-06		Topoisomerase
32	11 1500	150505	1	0.021720173	1.002 00	1.5 15015 15	II inhibitor (40)
33	4143_C9	62914	1	7.444298641	2.801E-10	2.06296642	(40)
34	4143_C10	606985	1	10.19900361	9.919E-12		Topoisomerase II inhibitor
35	4144_G7	254681	1	7.976999744	2.41E-11	3.30060634	(80) Topoisomerase II inhibitor
36	4145_D4	268665	1	7.657827234	2.453E-10	0.97737873	(60) DNA synthesis inhibitor (60)
37	4145_G5	306698	1	7.923868435	>1.00E-06	2.03708022	minoitor (00)
38	4121_A6	4972	2	6.742820667		0.70335821	
39	4121_A8	19630	2	8.537524348		0.73997201	
40	4123_H10	2805	2	7.23286013		0.6770056	
41	4124_E8	16555	2	7.591147773		0.8048041	
42	4125_B6	3535	2	6.993009343		0.84584888	
43	4127_G11	27063	2	6.439058017		1.13456157	
44	4128_D5	47924	2	6.449536192		0.89412313	
45	4129_D8	36738	2	6.610206089		0.87290112	
46	4130_H10	108895	2	7.361554387		0.86054104	
47	4131_H11	681152	2	6.856025461		0.59864739	
48	4136_E6	632536	2	7.00534393		0.80806903	
49	4140_G4	122351	2	6.968172168		1.23507463	TOTAL III
50	4142_D8	268879	2	13.72791324			DNA synthesis inhibitor (40)
51	4142_H2	48458	2	8.564443963		1.66954291	
52	4143_E3	209910	2	9.581766236		1.22504664	
53	4143_E10	328087	2	8.762714287		1.21245336	
54 55	4144_D9	521777	2	9.262232258		8.04127799	
55 56	4144_D11 4144_E2	310551 292222	2 2	28.17915266 7.520592126		0.92863806 3.41907649	Tubulin
57	4144_G11	321237	2	7.377240696			Binder (60) DNA synthesis
58	4144_H2	259969	2	11.1918293		5.61497201	inhibitor (40)
58 59	4144_H2 4144_H5	259969 259968	2	9.793991594		6.21501866	
60	4144_H3 4145_C4	239908	2	6.947818406		1.26096082	
61	4145_E6	166687	2	7.901324787		1.84071828	
62	4145_H6	119889	2	13.63421931		1.26888993	
63	4143II0 4132F3	676693	3	7.48119818	1.546E-11	1.44776119	***
64	4135_D7	122657	3	7.092535262	2.79E-10	0.78941231	
65	4138_B4	295642	3	13.74937928	1.085E-11	2.22714552	
66	4139_B8	13480	3	13.10907474	4.117E-10	1.04967351	
67	4139_B11	150117	3	7.776786651	9.16E-11	0.67537313	***

TABLE 10-continued

	BIOACTIVE SMALL MOLECULES						
Compound	Location in Plate	NSC Numbers	Bioactivity	Cytotoxicity (%)	Growth IC50 (M) in PAE	Apoptosis PAE (RFU)	Mechanism of Action
68	4139_C8	18877	3	19.12681814	1.404E-10	1.3542444	
69	4141_B4	48300	3	8.261734079	3.837E-10	1.1354944	****
70	4142_A2	321206	3	38.52519823	6.112E-12	1.02122201	
71	4142_B6	292596	3	9.501696674	7.577E-11	2.30573694	****
72	4144_G4	112200	3	13.88370945	1.386E-10	1.36847015	
73	4145_D5	274547	3	15.66300644	3.579E-10	0.90625	
74	4123_B6	4265	4				
75	4130_G5	130830	4				
76	4133_D11	54044	4				
77	4143 A5	327705	4				

- 1 Endothelial Cell Growth Inhibitor
- 2 Tube Formation Inhibitor
- 3 Growth Inhibitor + Tube Formation Inhibitor
- 4 Specific Tumor Cell Growth Inhibitor
- \*\*\*\* Compounds with both growth and tube formation inhibitory activities and no significant cytotoxicity.

### Example 2

## In Vivo Inhibition of Angiogenesis in Xenograft Tumors

This example shows the in vivo inhibition of angiogenesis in tumor xenografts by administration of selected small molecules described herein.

#### Methods

For generation of mouse xenografts, female athymic nude mice were injected with 5×10<sup>6</sup> A549 or SK-ML-1 cells (100  $\mu$ l/mouse) in the left hindquarters. The resulting tumors were measured three times a week and body weight was measured 35 twice a week. 14 days following tumor cell injection, mice with tumor burdens greater than 100 mm<sup>3</sup> or less than 50 mm<sup>3</sup> were eliminated from the study. The remaining mice were randomized into groups (10 animals per group) and treated three times a week (Mon/Wed/Fri) for four weeks with 100 of 40 10 uM sterile drug solutions (stored at 4° C.) that were administered via IP injection. Tumors were measured three times per week (Mon/Wed/Fri) for four additional weeks and mice weighed twice weekly (Tues/Thu) for an additional four weeks. On week six or when tumors exceeded 2 cm, the mice 45 were euthanized. A full necropsy was performed and any abnormal tissues were snap frozen (-80° C.). Tumors were excised and bisected into four parts. Two parts were fixed in 2% formalin overnight at 4° C., rinsed in cold PBS and prepared for paraffin embedding. The other two parts were 50 snap frozen on dry ice or liquid nitrogen and stored at -80° C. Results

7 of the 77 SMs described above were chosen for in vivo xenograft experiments. SMs were selected based on the type of inhibition (tube formation-NSC 19630, NSC 292222, NSC 259969; or tube formation+growth-NSC 122657, NSC 150117, NSC 48300, NSC 292596), percentage of inhibition, low cytotoxicity levels and availability. For the tumor xenografts, two different human cancer models were chosen. A549 is a lung carcinoma which induces almost exclusively 60 peritumoral vasculature in subcutaneous tumors. In contrast, SK-ML-1 is a leiomyosarcoma which induces high levels of intratumoral angiogenesis. Every experiment included a negative PBS control as well as the known antiangiogenic drug AVASTIN® as a positive control. AVASTIN® was pre- 65 viously shown to significantly inhibit the growth of both A549 as well as SK-ML-1.

As shown in FIG. 15, all the small molecules inhibited tumor growth to varying degrees. In general, and as expected, the small molecules more strongly inhibited the growth of the angiogenic tumor SK-ML-1 (bottom panels) in comparison to the less angiogenic tumor A549 (top panels). Of the SMs tested, the strongest inhibitors of tumor growth were NSC 48300, NSC 150117 and NSC 259969, all of which showed potencies similar to AVASTIN® in the SK-ML-1 model.

### Example 3

### Tubulin Binding Potential of Antiangiogenic Small Molecules

Many known antiangiogenic drugs bind to tubulin and interfere with its polymerization. Likewise, it has also been shown that molecules which interfere with tubulin polymerization are potentially antiangiogenic. In contrast, the abovedescribed SAR analysis predicted that none of the seven small molecules shown in Example 2 to be antiangiogenic in xenograft assays would inhibit tubulin polymerization. This example confirms this prediction.

The tubulin binding activity of the small molecules studied in vivo was characterized using a fluorescence-based, tubulin polymerization assay from Cytoskeleton (Denver, Colo.; Cat. #BK011P), according to the manufacturer's instructions. As predicted by the SAR analysis, none of the small molecules studied interfered with tubulin polymerization (FIG. 16).

## Example 4

#### Effect of SMs on Receptor Tyrosine Kinase Activity

Most of the currently FDA approved antiangiogenic therapies (such as AVASTIN® or sunitinib) target receptor tyrosine kinase (RTK) activity. It has recently been proposed by independent groups (Pàez-Ribes et al., Cancer Cell, 15: 220-231, 2009; Ebos et al., Cancer Cell, 15: 232-239, 2009) that RTK inhibitors have deleterious collateral effects, including stimulation of metastasis and alternative angiogenesis pathways other than those inhibited by the drugs. This example shows the characterization of the RTK inhibitory activity of a subset of the small molecules described herein.

To characterize the RTK inhibitory activity of the antiangiogenic SMs described herein, 36 compounds were chosen and screened using Invitrogen's SelectScreen® kinase activ-

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TABLE 11-continued

ity profiling service (described on-line at tools.invitrogen.com/content.cfm?pageid=10413#selection). VEGFR1 and FGFR2 RTK inhibitory activities were studied. The results of the screen are detailed in Table 11. The % inhibition (and mean % inhibition) of RTK activity from two independent 5 trials is shown Of the seven SMs tested in vivo in Example 2, only NSC 19630 and NSC 48300 showed RTK inhibitory activity, and only for for the VEGFR2 receptor. Overall, a small minority of the SMs tested had any substantial kinase inhibitory activity. This observation supports a mechanism of 10 antiangiogenic action other than RTK inhibition for most of the SMs described herein.

TABLE 11

NSC# Tested		KINA	SE INHIBITION	V	
19630   FGFR1   2					
19630   FGFR1   2					
19630   KDR(VEGFR2)   90   91   90   2805   FGFR1   1   10   6   6   2805   KDR(VEGFR2)   42   52   47   16555   KDR(VEGFR2)   11   11   11   11   11   33   33   3					
2805 FGFR1 1 1 10 6 2805 KDR(VEGFR2) 42 52 47 16555 FGFR1 3 3 3 16555 KDR(VEGFR2) 11 11 11 11 3535 FGFR1 -1 -3 -2 3535 KDR(VEGFR2) 10 5 8 27063 FGFR1 -1 -3 -2 -3 27063 KDR(VEGFR2) 12 11 11 47924 FGFR1 1 3 2 47924 KDR(VEGFR2) 12 11 8 19 36738 FGFR1 -1 4 1 3 2 47924 KDR(VEGFR2) 16 17 16 108895 FGFR1 4 4 4 4 4 108895 FGFR1 4 4 4 4 4 108895 FGFR1 4 4 4 4 4 4 108895 KDR(VEGFR2) 15 6 6 6 681152 FGFR1 4 3 3 3 676693 FGFR1 4 3 3 3 676693 FGFR1 4 3 3 3 676693 FGFR1 4 4 3 3 3 676693 KDR(VEGFR2) 1 1 8 5 122657 FGFR1 5 3 -3 -3 122657 FGFR1 1 1 1 4 4 632536 FGFR1 1 1 1 4 4 632536 KDR(VEGFR2) 15 16 16 632536 KDR(VEGFR2) 15 16 16 632536 KDR(VEGFR2) 17 18 15 295642 FGFR1 1 1 1 4 4 632536 KDR(VEGFR2) 19 17 18 150117 KDR(VEGFR2) 19 17 18 150117 KDR(VEGFR2) 19 17 18 13480 FGFR1 5 10 8 13480 KDR(VEGFR2) 1 4 2 3 18877 FGFR1 -3 0 -2 122551 FGFR1 -3 0 -2 122551 FGFR1 -3 0 -2 122551 FGFR1 -3 0 -2 12351 FGFR1 -3 0 -2 128877 FGFR1 -3 0 0 0 0 0 0 0 0 0 0					
2805         KDR(VEGFR2)         42         52         47           16555         FGFRI         3         3         3           16555         KDR(VEGFR2)         11         11         11           15555         KDR(VEGFR2)         10         5         8           27063         KDR(VEGFR2)         10         5         8           27063         KDR(VEGFR2)         12         11         11           47924         FGFRI         1         3         2           47924         KDR(VEGFR2)         21         18         19           36738         FGFRI         -1         4         1           36738         KDR(VEGFR2)         16         17         16           108895         FGFRI         4         4         4         4           108895         KDR(VEGFR2)         10         8         9           676693         KDR(VEGFR2)         10         8         9           676693         KDR(VEGFR2)         1         8         5           122657         FGFRI         -3         -3         -3           122657         FGFRI         -3         -3					
16555 FGFR1 3 3 3 3 3 3 3 3 16555 KDR(VEGFR2) 111 11 11 11 11 11 35355 FGFR1 -1 -3 -2 2 3535 KDR(VEGFR2) 10 5 8 8 27063 FGFR1 -3 -2 -3 27063 KDR(VEGFR2) 12 11 11 11 11 14 47924 FGFR1 1 3 2 2 47924 KDR(VEGFR2) 21 18 19 36738 FGFR1 -1 4 1 3 2 2 1 18 19 36738 KDR(VEGFR2) 16 17 16 108895 FGFR1 4 4 4 4 4 108895 KDR(VEGFR2) 5 6 6 6 6 681152 KDR(VEGFR2) 10 8 9 6 6693 KDR(VEGFR2) 10 8 9 676693 KDR(VEGFR2) 10 8 9 9 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6					
16555 KDR(VEGFR2) 11 11 11 11 33535 FGFR1 -1 -3 -2 3535 KDR(VEGFR2) 10 5 8 8 27063 FGFR1 -3 -2 -3 27063 KDR(VEGFR2) 12 11 11 11 47924 FGFR1 1 3 3 2 47924 KDR(VEGFR2) 12 11 8 19 36738 FGFR1 -1 4 1 1 36738 KDR(VEGFR2) 16 17 16 108895 FGFR1 4 4 4 4 4 108895 KDR(VEGFR2) 5 6 6 6 6 681152 FGFR1 4 3 3 3 681152 KDR(VEGFR2) 10 8 9 9 676693 FGFR1 4 3 3 3 676693 KDR(VEGFR2) 1 1 8 5 9 122657 FGFR1 4 3 3 3 122657 FGFR1 4 4 3 632536 FGFR1 1 1 1 4 14 14 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16		'			
3535 FGFR1					
3535 KDR(VEGFR2) 10 5 8 27063 FGFR1 -3 -2 -3 27063 KDR(VEGFR2) 12 11 11 47924 FGFR1 1 3 2 47924 KDR(VEGFR2) 21 18 19 36738 FGFR1 -1 4 1 36738 KDR(VEGFR2) 16 17 16 108895 FGFR1 4 4 4 4 108895 FGFR1 4 4 3 3 3 681152 KDR(VEGFR2) 5 6 6 6 681152 FGFR1 4 3 3 3 681152 KDR(VEGFR2) 10 8 9 676693 FGFR1 4 3 3 3 676693 KDR(VEGFR2) 1 1 8 5 122657 FGFR1 -3 -3 -3 -3 122657 KDR(VEGFR2) 14 14 14 14 14 632536 FGFR1 1 1 1 4 14 14 14 632536 KDR(VEGFR2) 15 16 16 16255642 FGFR1 1 1 1 4 14 14 14 632536 KDR(VEGFR2) 15 16 16 1632536 KDR(VEGFR2) 15 16 16 1632536 KDR(VEGFR2) 15 16 16 1632536 KDR(VEGFR2) 17 18 150117 FGFR1 2 9 6 13480 FGFR1 2 9 6 13480 FGFR1 3 0 -2 18877 KDR(VEGFR2) 4 2 3 18877 FGFR1 -3 0 -2 18877 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 5 5 5 10 8 13480 FGFR1 -1 4 4 4 4 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 5 5 5 10 8 13480 KDR(VEGFR2) 40 38 39 48458 FGFR1 5 5 5 5 10 8 6 13480 KDR(VEGFR2) 9 9 9 9 18 14 122351 KDR(VEGFR2) 9 9 9 9 18 17 18 17 18 17 18 17 18 18 18 18 18 18 18 18 18 18 18 18 18 1					
27063 KDR(VEGFR2)				5	8
47924         FGFR1         1         3         2           47924         KDR(VEGFR2)         21         18         19           36738         FGFR1         -1         4         1           36738         KDR(VEGFR2)         16         17         16           108895         FGFR1         4         4         4         4           108895         KDR(VEGFR2)         5         6         6         6           681152         FGFR1         4         3         3         3           681152         KDR(VEGFR2)         10         8         9           676693         FGFR1         4         3         3         3           676693         KDR(VEGFR2)         1         8         5           122657         FGFR1         -3         -3         -3         -3           122657         FGFR1         -1         4         14		FGFR1	-3	-2	-3
47924         KDR(VEGFR2)         21         18         19           36738         FGFRI         -1         4         1           36738         KDR(VEGFR2)         16         17         16           108895         FGFRI         4         4         4           108895         KDR(VEGFR2)         5         6         6           681152         FGFRI         4         3         3           681152         KDR(VEGFR2)         10         8         9           676693         FGFRI         4         3         3           676693         KDR(VEGFR2)         1         8         5           122657         FGFRI         -3         -3         -3           122657         FGFRI         1         1         4         14					
36738 KDR(VEGFR2) 16 17 16 108895 FGFR1 4 4 4 4 108895 KDR(VEGFR2) 5 6 6 6 681152 FGFR1 4 3 3 3 681152 KDR(VEGFR2) 10 8 9 676693 FGFR1 4 3 3 3 676693 KDR(VEGFR2) 1 8 5 632536 FGFR1 1 4 14 14 14 632536 FGFR1 1 1 1 1 1 4 632536 KDR(VEGFR2) 15 16 16 16 295642 FGFR1 2 9 6 13480 FGFR1 2 7 5 130117 KDR(VEGFR2) 19 17 18 13480 KDR(VEGFR2) 28 24 26 13480 FGFR1 5 10 8 13480 KDR(VEGFR2) 4 2 3 18877 KDR(VEGFR2) 10 4 7 122351 FGFR1 -3 0 -2 18877 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 10 4 7 122351 FGFR1 -1 4 1 122351 KDR(VEGFR2) 4 4 2 3 18877 KDR(VEGFR2) 4 4 4 4 4 48300 KDR(VEGFR2) 4 4 4 4 4 48300 KDR(VEGFR2) 76 78 77 321206 FGFR1 5 5 5 5 321206 KDR(VEGFR2) 76 78 77 321206 FGFR1 5 5 5 5 321206 KDR(VEGFR2) 76 78 77 321206 FGFR1 5 5 5 5 321206 KDR(VEGFR2) 76 78 77 321206 FGFR1 5 5 5 5 321206 KDR(VEGFR2) 76 78 77 321207 FGFR1 3 -2 1 268879 KDR(VEGFR2) 9 9 9 9 202596 KDR(VEGFR2) 13 9 11 328087 FGFR1 3 5 4 328087 KDR(VEGFR2) 9					
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676693         KDR(VEGFR2)         1         8         5           122657         FGFRI         -3         -3         -3           122657         KDR(VEGFR2)         14         14         14           632536         FGFR1         1         1         4           632536         KDR(VEGFR2)         15         16         16           295642         FGFR1         2         9         6           295642         KDR(VEGFR2)         19         17         18           150117         FGFR1         2         7         5           150117         KDR(VEGFR2)         28         24         26           13480         FGFR1         5         10         8         13480         KDR(VEGFR2)         4         2         3         18877         FGFR1         -3         0         -2         18877         KDR(VEGFR2)         10         4         7         122351         FGFR1         -1         4         1         1         122351         KDR(VEGFR2)         4         4         4         4         4         4         4         4         4         4         4         4         4         4					
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632536         FGFR1         1         1         4           632536         KDR(VEGFR2)         15         16         16           295642         KDR(VEGFR2)         19         17         18           150117         FGFR1         2         7         5           150117         KDR(VEGFR2)         28         24         26           13480         FGFR1         5         10         8           13480         KDR(VEGFR2)         4         2         3           18877         FGFR1         -3         0         -2           18877         KDR(VEGFR2)         10         4         7           122351         FGFR1         -1         4         1           122351         KDR(VEGFR2)         4         4         4           48300         FGFR1         8         10         9           48300         FGFR1         8         10         9           321206         FGFR1         5         5         5           321206         FGFR1         4         4         4           292596         FGFR1         4         4         4           292596 <td></td> <td></td> <td></td> <td>-3</td> <td></td>				-3	
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295642         FGFR1         2         9         6           295642         KDR(VEGFR2)         19         17         18           150117         FGFR1         2         7         5           150117         KDR(VEGFR2)         28         24         26           13480         FGFR1         5         10         8           13480         KDR(VEGFR2)         4         2         3           18877         FGFR1         -3         0         -2           18877         KDR(VEGFR2)         10         4         7           122351         FGFR1         -1         4         1           122351         KDR(VEGFR2)         4         4         4           48300         FGFR1         8         10         9           48300         FGFR1         8         10         9           48300         FGFR1         8         10         9           48300         FGFR1         5         5         5           321206         KDR(VEGFR2)         76         78         77           321206         FGFR1         4         4         4           292596 <td>632536</td> <td>FGFR1</td> <td>1</td> <td>1</td> <td>4</td>	632536	FGFR1	1	1	4
295642         KDR(VEGFR2)         19         17         18           150117         FGFR1         2         7         5           150117         KDR(VEGFR1)         28         24         26           13480         FGFR1         5         10         8           13480         KDR(VEGFR2)         4         2         3           18877         FGFR1         -3         0         -2           18877         KDR(VEGFR2)         10         4         7           122351         FGFR1         -1         4         1           122351         KDR(VEGFR2)         4         4         4           48300         FGFR1         8         10         9           48300         FGFR1         8         10         9           48300         FGFR1         5         5         5           321206         FGFR1         5         5         5           321206         FGFR1         4         4         4           292596         FGFR1         4         4         4           292596         FGFR1         3         -2         1           268879					
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150117   KDR(VEGFR2)   28   24   26     13480   FGFR1   5   10   8     13480   KDR(VEGFR2)   4   2   3     18877   FGFR1   -3   0   -2     18877   KDR(VEGFR2)   10   4   7     122351   FGFR1   -1   4   1     122351   KDR(VEGFR2)   4   4   4   4     48300   FGFR1   8   10   9     48300   KDR(VEGFR2)   76   78   77     321206   FGFR1   5   5   5     321206   KDR(VEGFR2)   52   45   49     292596   FGFR1   4   4   4     292596   KDR(VEGFR2)   9   18   14     268879   FGFR1   3   -2   1     268879   KDR(VEGFR2)   40   38   39     48458   FGFR1   5   8   6     48458   KDR(VEGFR2)   13   9   11     328087   FGFR1   3   5   4     328087   KDR(VEGFR2)   9   9   9     209910   FGFR1   2   5   4     209910   KDR(VEGFR2)   9   9   9     209910   KDR(VEGFR2)   9   10   10     310551   KDR(VEGFR2)   9   10   10     310551   KDR(VEGFR2)   21   18   20     521777   FGFR1   1   0   1     521777   KDR(VEGFR2)   10   8   9     292222   FGFR1   2   5   3     292222   FGFR1   1   5   6     321237   KDR(VEGFR2)   105   104   105		\ /			
13480         FGFR1         5         10         8           13480         KDR(VEGFR2)         4         2         3           18877         FGFR1         -3         0         -2           18877         KDR(VEGFR2)         10         4         7           122351         FGFR1         -1         4         1           122351         KDR(VEGFR2)         4         4         4           48300         FGFR1         8         10         9           48300         KDR(VEGFR2)         76         78         77           321206         FGFR1         5         5         5         5           321206         KDR(VEGFR2)         52         45         49         292596         FGFR1         4         4         4         4         4         292596         FGFR1         4         4         4         4         292596         FGFR1         3         -2         1         1         268879         FGFR1         3         -2         1         1         268879         FGFR1         3         -2         1         1         3         9         11         3328087         FGFR1         5					
13480         KDR(VEGFR2)         4         2         3           18877         FGFR1         -3         0         -2           18877         KDR(VEGFR2)         10         4         7           122351         FGFR1         -1         4         1           122351         KDR(VEGFR2)         4         4         4           48300         FGFR1         8         10         9           48300         KDR(VEGFR2)         76         78         77           321206         FGFR1         5         5         5           321206         KDR(VEGFR2)         52         45         49           292596         FGFR1         4         4         4         4           292596         KDR(VEGFR2)         9         18         14           292596         KDR(VEGFR2)         9         18         14           292596         FGFR1         3         -2         1           268879         FGFR1         3         -2         1           48458         FGFR1         3         9         11           328087         FGFR1         3         5         4		, ,			
18877         FGFR1         -3         0         -2           18877         KDR(VEGFR2)         10         4         7           122351         FGFR1         -1         4         1           122351         KDR(VEGFR2)         4         4         4           48300         FGFR1         8         10         9           48300         KDR(VEGFR2)         76         78         77           321206         FGFR1         5         5         5           321206         KDR(VEGFR2)         52         45         49           292596         FGFR1         4         4         4         4           292596         FGFR1         4         4         4         4           292596         FGFR1         3         -2         1         1           268879         FGFR1         3         -2         1         1         2         58         6           48458         FGFR1         5         8         6         4         8458         FGFR1         3         9         11         3         28087         FGFR1         3         5         4         4         328087					
18877         KDR(VEGFR2)         10         4         7           122351         FGFR1         -1         4         1           122351         KDR(VEGFR2)         4         4         4           48300         FGFR1         8         10         9           48300         KDR(VEGFR2)         76         78         77           321206         FGFR1         5         5         5           321206         KDR(VEGFR2)         52         45         49           292596         FGFR1         4         4         4         4           292596         FGFR1         3         -2         1         1         268879         FGFR1         3         -2         1         2         528879         FGFR1         3         -2         1         3         -2         1         2         58879         KDR(VEGFR2)         40         38         39         48458         FGFR1         5         8         6         6         48458         FGFR1         3         9         11         328087         FGFR1         3         5         4         4         4         4         4         4         4         4 <td></td> <td></td> <td>•</td> <td></td> <td></td>			•		
122351         FGFR1         -1         4         1           122351         KDR(VEGFR2)         4         4         4           48300         FGFR1         8         10         9           48300         KDR(VEGFR2)         76         78         77           321206         FGFR1         5         5         5           321206         KDR(VEGFR2)         52         45         49           292596         FGFR1         4         4         4         4           292596         FGFR1         3         -2         1         4					
48300         FGFR1         8         10         9           48300         KDR(VEGFR2)         76         78         77           321206         FGFR1         5         5         5           321206         KDR(VEGFR2)         52         45         49           292596         FGFR1         4         4         4         4           292596         KDR(VEGFR2)         9         18         14           268879         FGFR1         3         -2         1           268879         KDR(VEGFR2)         40         38         39           48458         FGFR1         5         8         6           48458         KDR(VEGFR2)         13         9         11           328087         FGFR1         3         5         4           328087         KDR(VEGFR2)         9         9         9         9           209910         KDR(VEGFR2)         9         10         10           310551         FGFR1         -5         -1         -3           310551         KDR(VEGFR2)         21         18         20           521777         KDR(VEGFR2)         10		\ /		4	
48300         KDR(VEGFR2)         76         78         77           321206         FGFR1         5         5         5           321206         KDR(VEGFR2)         52         45         49           292596         FGFR1         4         4         4         4           292596         KDR(VEGFR2)         9         18         14           268879         FGFR1         3         -2         1           268879         KDR(VEGFR2)         40         38         39           48458         FGFR1         5         8         6           48458         KDR(VEGFR2)         13         9         11           328087         FGFR1         3         5         4           328087         KDR(VEGFR2)         9         9         9           209910         FGFR1         2         5         4           209910         KDR(VEGFR2)         9         10         10           310551         KDR(VEGFR2)         9         10         10           310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1<	122351	KDR(VEGFR2)	4	4	4
321206         FGFR1         5         5         5           321206         KDR(VEGFR2)         52         45         49           292596         FGFR1         4         4         4           292596         KDR(VEGFR2)         9         18         14           268879         FGFR1         3         -2         1           268879         KDR(VEGFR2)         40         38         39           48458         FGFR1         5         8         6           48458         KDR(VEGFR2)         13         9         11           328087         FGFR1         3         5         4           328087         KDR(VEGFR2)         9         9         9           209910         FGFR1         2         5         4           209910         KDR(VEGFR2)         9         10         10           310551         KDR(VEGFR2)         9         10         10           310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9      <			8		
321206         KDR(VEGFR2)         52         45         49           292596         FGFR1         4         4         4           292596         KDR(VEGFR2)         9         18         14           268879         FGFR1         3         -2         1           268879         KDR(VEGFR2)         40         38         39           48458         FGFR1         5         8         6           48458         KDR(VEGFR2)         13         9         11           328087         FGFR1         3         5         4           328087         KDR(VEGFR2)         9         9         9           209910         FGFR1         2         5         4           209910         KDR(VEGFR2)         9         10         10           310551         FGFR1         -5         -1         -3           310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3					
292596         FGFR1         4         4         4           292596         KDR(VEGFR2)         9         18         14           268879         KDR(VEGFR2)         40         38         39           48458         FGFR1         5         8         6           48458         KDR(VEGFR2)         13         9         11           328087         FGFR1         3         5         4           328087         KDR(VEGFR2)         9         9         9           209910         FGFR1         2         5         4           209910         KDR(VEGFR2)         9         10         10           310551         FGFR1         -5         -1         -3           310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3           292222         FGFR1         2         5         3           292222         FGFR1         1         5         6 <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
292596         KDR(VEGFR2)         9         18         14           268879         FGFR1         3         -2         1           268879         KDR(VEGFR2)         40         38         39           48458         FGFR1         5         8         6           48458         KDR(VEGFR2)         13         9         11           328087         FGFR1         3         5         4           328087         KDR(VEGFR2)         9         9         9           209910         FGFR1         2         5         4           209910         KDR(VEGFR2)         9         10         10           310551         FGFR1         -5         -1         -3           310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3           292222         FGFR1         2         5         3           292222         FGFR1         1         5         6 <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>					
268879         FGFR1         3         -2         1           268879         KDR(VEGFR2)         40         38         39           48458         FGFR1         5         8         6           48458         KDR(VEGFR2)         13         9         11           328087         FGFR1         3         5         4           328087         KDR(VEGFR2)         9         9         9           209910         FGFR1         2         5         4           209910         KDR(VEGFR2)         9         10         10           310551         FGFR1         -5         -1         -3           310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3           292222         FGFR1         2         5         3           292222         FGFR1         1         5         6           321237         KDR(VEGFR2)         105         104         105					
268879         KDR(VEGFR2)         40         38         39           48458         FGFR1         5         8         6           48458         KDR(VEGFR2)         13         9         11           328087         FGFR1         3         5         4           328087         KDR(VEGFR2)         9         9         9           209910         FGFR1         2         5         4           209910         KDR(VEGFR2)         9         10         10           310551         FGFR1         -5         -1         -3           310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3           292222         FGFR1         2         5         3           292222         FGFR1         1         5         6           321237         KDR(VEGFR2)         105         104         105			-		
48458     FGFR1     5     8     6       48458     KDR(VEGFR2)     13     9     11       328087     FGFR1     3     5     4       328087     KDR(VEGFR2)     9     9     9       209910     FGFR1     2     5     4       209910     KDR(VEGFR2)     9     10     10       310551     FGFR1     -5     -1     -3       310551     KDR(VEGFR2)     21     18     20       521777     FGFR1     1     0     1       521777     KDR(VEGFR2)     10     8     9       292222     FGFR1     2     5     3       292222     FGFR1     2     5     3       292222     KDR(VEGFR2)     8     7     7       321237     FGFR1     1     5     6       321237     KDR(VEGFR2)     105     104     105					
48458         KDR(VEGFR2)         13         9         11           328087         FGFR1         3         5         4           328087         KDR(VEGFR2)         9         9         9           209910         FGFR1         2         5         4           209910         KDR(VEGFR2)         9         10         10           310551         FGFR1         -5         -1         -3           310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3           292222         FGFR1         2         5         3           292222         KDR(VEGFR2)         8         7         7           321237         FGFR1         1         5         6           321237         KDR(VEGFR2)         105         104         105					
328087     FGFR1     3     5     4       328087     KDR(VEGFR2)     9     9     9       209910     FGFR1     2     5     4       209910     KDR(VEGFR2)     9     10     10       310551     FGFR1     -5     -1     -3       310551     KDR(VEGFR2)     21     18     20       521777     FGFR1     1     0     1       521777     KDR(VEGFR2)     10     8     9       292222     FGFR1     2     5     3       292222     FGFR1     2     5     3       321237     FGFR1     1     5     6       321237     KDR(VEGFR2)     105     104     105					
209910         FGFR1         2         5         4           209910         KDR(VEGFR2)         9         10         10           310551         FGFR1         -5         -1         -3           310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3           292222         FGFR1         2         5         3           321237         FGFR1         1         5         6           321237         KDR(VEGFR2)         105         104         105	328087		3	5	4
209910         KDR(VEGFR2)         9         10         10           310551         FGFR1         -5         -1         -3           310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3           292222         KDR(VEGFR2)         8         7         7           321237         FGFR1         1         5         6           321237         KDR(VEGFR2)         105         104         105	328087	KDR(VEGFR2)	9	9	9
310551     FGFR1     -5     -1     -3       310551     KDR(VEGFR2)     21     18     20       521777     FGFR1     1     0     1       521777     KDR(VEGFR2)     10     8     9       292222     FGFR1     2     5     3       292222     KDR(VEGFR2)     8     7     7       321237     FGFR1     1     5     6       321237     KDR(VEGFR2)     105     104     105					•
310551         KDR(VEGFR2)         21         18         20           521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3           292222         KDR(VEGFR2)         8         7         7           321237         FGFR1         1         5         6           321237         KDR(VEGFR2)         105         104         105					
521777         FGFR1         1         0         1           521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3           292222         KDR(VEGFR2)         8         7         7           321237         FGFR1         1         5         6           321237         KDR(VEGFR2)         105         104         105					
521777         KDR(VEGFR2)         10         8         9           292222         FGFR1         2         5         3           292222         KDR(VEGFR2)         8         7         7           321237         FGFR1         1         5         6           321237         KDR(VEGFR2)         105         104         105					
292222     FGFR1     2     5     3       292222     KDR(VEGFR2)     8     7     7       321237     FGFR1     1     5     6       321237     KDR(VEGFR2)     105     104     105					
292222     KDR(VEGFR2)     8     7     7       321237     FGFR1     1     5     6       321237     KDR(VEGFR2)     105     104     105					
321237 FGFR1 1 5 6 321237 KDR(VEGFR2) 105 104 105					
321237 KDR(VEGFR2) 105 104 105					
112200 FGFR1 9 5 7					
	112200	FGFR1	9	5	7

KINASE INHIBITIO Kinase Activity Mean % Comp. NSC# Tested Inhibition Inhibition Inhibition 112200 KDR(VEGFR2) 259969 259969 KDR(VEGFR2) 259968 FGFR1 KDR(VEGFR2) 259968 203328 FGFR1 KDR(VEGFR2) 203328 274547 FGFR1 6 274547 KDR(VEGFR2) 14 12 13 166687 FGFR1 21 22 22 166687 KDR(VEGFR2) 6 8 119889 96 95 96 FGFR1 119889 KDR(VEGFR2) 103 103 104

SMs that inhibited kinase activity 40% or more are indicated in bold. SMs also characterized for in vivo activity are italicized.

Example 5

Effect of Antiangiogenic SMs on Gene Expression During Endothelial Tube Formation

This example shows the effect of anti-angiogenic small molecules described herein on the expression of genes in the angiogenesis pathway.

Methods

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For gene expression studies, three independent experiments were run for each SM tested. 90.000 cells/well (6 wells/treatment) of dermal microvascular endothelial cells (Lonza, Walkersville, Md.) were seeded on polymerized 35 GELTREX<sup>TM</sup> gel matrix (Invitrogen, Carlsbad, Calif.) in 24 well plates. Wells were immediately treated with the same volume of 1 μM SM or PBS. After 24 hours incubation at 37° C. and 5% CO<sub>2</sub>, cells were extracted using Cell Recovery Solution (BD Biosciences, San Jose, Calif., Cat. #354253). Total RNA was extracted with the RNeasy Mini Kit (Qiagen, Valencia, Calif., Cat. #74104), and retrotranscribed using SUPERSCRIPT® First-Strand reverse transcriptase (Invitrogen, Carlsbad, Calif., Cat. #11904-018). The real time PCR reactions were performed in an Opticon 2 cycler (MJ Research, Waltham, Mass.). Amplification was performed in a final volume of 25 µl, containing 2 µl cDNA (1:10 dilution from the reversed transcribed reaction) and 2 ul of primer mixture (10 µM each of forward and reverse primers). Samples were amplified as follows: after initial denaturation at 95 C for 2 minutes, reactions were run for 46 cycles at 95° C. for 30 seconds, 60° C. for 30 seconds, and 72° C. for 45 seconds. Fluorescence was measured in every cycle and a melting curve was run after the PCR by increasing temperature from 50 to 96° C. (in 0.5° C. increments). A defined single peak was obtained for all amplicons, thus confirming the specificity of the amplification. Results

To better understand the mechanism of action of the seven small molecules used in the in vivo studies presented in Example 2, the effect of these molecules on the expression of angiogenesis genes in primary endothelial cells during tube formation was studied. The genes that were monitored were selected based on their relevance to the angiogenesis process. The genes assayed and primers used in the real-time PCR are presented in Tables 12 and 13. All experiments were done in triplicate. The results are shown in the volcano plots of FIG.

in Table 14.

17. Log 2 fold-change is presented in the X-axis and log 10 P value in the Y-axis. These results are also summarized below

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TABLE 12-continued

GENES IN REAL TIME PCR ARRAYS

	TAB	LE 12		5	Gene Symbol	GenBank Accession	NCBI Protein Accession	Coding DNA Length
Gl		ΓΙΜΕ PCR ARRAY		-	TGFA TGFB1	NM_003236 NM_000660	NP_003227 NP_000651	483 1176
Gene Symbol	GenBank Accession	NCBI Protein Accession	Coding DNA Length	4.0	TGFB2 TGFBR1	NM_003238 NM_004612	NP_003229 NP_004603	1245 1512
AKT1	NM_005163	NP_005154	1443	<b>-</b> 10	THBS1 THBS2	NM_003246 NM_003247	NP_003237 NP_003238	3513 3519
ANGPT1	NM_001146	NP_001137	1497		TIMP1	NM_003254	NP_003245	624
ANGPT2	AF187858	AAF76526	1335		TIMP2	NM_003255	NP_003246	663
ANGPTL3	NM_014495	NP_055310	1383		TIMP3	NM 000362	NP_000353	636
ANGPTL4	NM_016109	NP_057193	1221		TNF	NM 000594	NP 000585	702
ANPEP	NM_001150	NP_001141	2904		TNFAIP2	NM_006291	NP 006282	1965
BAI1	NM 001702	NP_001693	4755	15	VEGFA	NM_003376	NP_003367	648
CCL11	NM_002986	NP_002977	294		VEGFC	NM 005429	NP_005420	1260
CCL2	NM_002982	NP_002973	300		CD248	NM_020404	NP 065137	2274
CDH5	NM_001795	NP_001786	2355		GPR124	AB040964	BAA96055	3621
COL18A1	NM_030582	NP_085059	4551		PLXDC1	NM_020405	NP_065138	1503
COL4A3	NM_000091	NP_000082	5013		ANTXR1	NM_032208	NP_115584	1695
dll4	NM_019074	NP_061947	2058	20	RASD2	NM_014310	NP_055125	801
CXCL10	NM_001565	NP_001556	297		ARHGEF17	NM_014786	NP_055601	6192
CXCL3	NM_002090	NP_002081	321		TNS3	AL833845	CAD38705	2714
CXCL5	NM_002994	NP_002985	345		DKK3	NM_015881	NP_056965	1053
CXCL6	NM_002993	NP_002984	345		MMP11	NM_005940	NP_005931	1467
CXCL9	NM_002416	NP 002407	378		NID1	BC045606	AAH45606	3345
TYMP	NM_001953	NP_001944	1449	25	THY1	NM_006288	NP_006279	486
S1PR1	NM_001400	NP_001391	1149		CST4	NM_001899	NP_001890	426
EFNA1	NM 182685	NP 872626	552		MRC2	NM_006039	NP_006030	4440
EFNA3	NM_004952	NP_004943	717		TNS1	AK001785	BAA91910	1197
EFNB2	NM_004093	NP_004084	1002		BMP1	AF318323	AAL55830	933
EGF	NM 001963	NP 001954	3624		COMT	NM_000754	NP 000745	816
ENG	NM_0001903	NP_000109	1878	20	PTPRCAP	NM_005608	NP 005599	621
	NM 004444	NP_004435	2964	30	57722	AB046848	BAB 13454	2943
EPHB4 EREG	NM_004444 NM_001432	NP 001423	510		EXTL3		NP 001431	2760
	_				vWF	NM_001440	NP_000543	
FGF1	NM_000800	NP_000791	468			NM_000552		8442
FGF2	NM_002006	NP_001997	633		PNMT	NM_002686	NP_002677	849
FGFR3	NM_000142	NP_000133	2421		58488	BC005112	AAH05112	582
FIGF	NM_004469	NP_004460	1065	35	ltbp4	AK074499	BAC11024	1911
FLT1	NM_002019	NP_002010	4017		23001	AK055806	BAB71020	2169
HAND2	NM_021973	NP_068808	654		4247	NM_002408	NP_002399	1344
HGF	NM_000601	NP_000592	2187		Sdc4	NM_002999	NP_002990	597
HIF1A	NM_001530	NP_001521	2481		Ralb	NM_002881	NP_002872	621
HPSE	NM_006665	NP_006656	1632		DGKG	NM_001346	NP_001337	2376
ID1	NM_002165	NP_002156	468	40	TRA2B	AK098191	BAC05256	759
ID3	NM_002167	NP_002158	360		CLIC1	NM_001288	NP_001279	726
IFNA1	NM_024013	NP_076918	570		90780	NM_138300	NP_612157	1221
IFNB1	NM_002176	NP_002167	564		5569	NM_181839	NP_862822	231
IFNG	NM_000619	NP_000610	501		151516	NM_152792	NP_690005	1032
IGF1	NM_000618	NP_000609	462		CALD1	AF247820	AAF69498	1446
IL1B	NM_000576	NP_000567	810	4.5	DUT	AF018432	AAB71393	759
IL6	NM_000600	NP_000591	639	45	copa	BC038447	AAH38447	3702
IL8	NM_000584	NP_000575	300		PDCD2	NM_144781	NP_659005	687
ITGAV	NM_002210	NP_002201	3147		151516	NM_152792	NP_690005	1032
ITGB3	NM_000212	NP_000203	2367		VGLL4	D50911	BAA09470	891
JAG1	NM_000214	NP_000205	3657		APOE	NM_000041	NP_000032	954
KDR	NM_002253	NP_002244	4071		8131	NM_012075	NP_036207	1710
LAMA5	NM_005560	NP_005551	11088	50	10988	AK091730	BAC03733	1368
LECT1	NM_007015	NP_008946	1005		9569	NM_005685	NP_005676	2835
LEP	NM_000230	NP_000221	504		Acvrl1	NM_000020	NP_000011	1512
MDK	NM_002391	NP_002382	432		Adcy4	NM_139247	NP_640340	3234
MMP2	NM_004530	NP_004521	1983		Calcrl	NM_005795	NP_005786	1386
MMP9	NM_004994	NP_004985	2124		Caskin2	NM_020753	NP_065804	3609
Notch4	NM_004557	NP_004548	6009	55	Ccbp2	NM_001296	NP_001287	1155
NRP1	NM_003873	NP_003864	2772		Cldn5	BC019290	AAH19290	801
NRP2	NM_003872	NP_003863	2781		01839	NM_001945	NP_001936	627
PDGFA	NM_002607	NP_002598	636		Egf17	NM_016215	NP_057299	822
PECAM1	NM_000442	NP_000433	2217		Ehd4	NM_139265	NP_644670	1626
PGF	NM_002632	NP_002623	513		Entpd1	AJ133134	CAB41887	921
PLAU	NM_002658	NP_002649	1296		Epas1	BC015869	AAH15869	306
PLG	NM_000301	NP_000292	2433	60	Ērg	NM_004449	NP_004440	1389
PLXDC1	NM_020405	NP_065138	1503		ESAM1	NM_138961	NP_620411	1173
PROK2	NM 021935	NP 068754	327		Fgd5	BX640820	CAE45896	3387
	NM_000962	NP_000953	1800		Gpr116	AL050295	CAB43394	1855
PTGS1					Hspa12b	NM_052970	NP_443202	2061
PTGS1 SERPINF1	NM 002615	NP 002606	1257					
SERPINF1	NM_002615 NM_021972	NP_002606 NP_068807	1257 1197					
	NM_002615 NM_021972 NM_015136	NP_002606 NP_068807 NP_055951	1257 1197 7713	65	Icam1 Icam2	NM_000201 NM_000873	NP_000192 NP_000864	1599 828

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TABLE 12-continued

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TABLE 12-continued

G	ENES IN REAL	TIME PCR ARRAY	YS		G	ENES IN REAL	TIME PCR ARRAY	/S
Gene Symbol	GenBank Accession	NCBI Protein Accession	Coding DNA Length	5	Gene Symbol	GenBank Accession	NCBI Protein Accession	Coding DNA Length
Lats2	NM_014572	NP_055387	3267		GRRP1	BC025658	AAH25658	816
Lrrk1	AB058693	BAB47419	4112		stard9	AB037721	BAA92538	5464
Mmrn2	NM_024756	NP_079032	2850		Ramp2	NM_005854	NP_005845	528
Myo1b	AJ001381	CAA04712	1310		Rasip1	BC042111	AAH42111	1567
PALD	AB033100	BAA86588	2586	10	Robo4	AK074163	BAB84989	2109
NM_023516	BC015770	AAH15770	1446		Sdpr	NM_004657	NP_004648	1278
55332	BC018435	AAH18435	717		Slc43a3	AP118070	AAF22014	318
CTTNBP2NL	NM_018704	NP_061174	1920		Slc9a3r2	U82108	AAB53042	981
CENTD3	NM_022481	NP_071926	4635		Slco2a1	BC041140	AAH41140	2035
C1orf54	NM_024579	NP_078855	396		B2M	NM_004048	NP_004039	360
134265	AK074185	BAB85011	2381	15	HPRT1	NM_000194	NP_000185	657
Npr3	NM_000908	NP_000899	1623	13	RPL13A	NM_012423	NP_036555	612
Pltp	NM_182676	NP_872617	1326		GAPDH	NM_002046	NP_002037	1008
Ptprb	BC051329	AAH51329	2316		ACTB	NM_001101	NP_001092	1128
Ptorm	NM 002845	NP 002836	4359	_				

TABLE 13

	REAL TIME PCR PRIMER	RS
Gene	PrimerBank ID Forward Primer	Reverse Primer
AKT1	4885061a1GCACAAACGAGGGGAGTACAT (SEQ ID NO: 1)	CCTCACGTTGGTCCACATC (SEQ ID NO: 2)
ANGPT1	20532340a1CTCGCTGCCATTCTGACTCAC (SEQ ID NO: 3)	GACAGTTGCCATCGTGTTCTG (SEQ ID NO: 4)
ANGPT2	8570647a1TCTTGGCCGCAGCCTATAAC (SEQ ID NO: 5)	TGCTGGACCTGATATTGCTTCT
ANGPTL3	7656888a1CTTCAATGAAACGTGGGAGAAC (SEQ ID NO: 7)	rgccagtaatcgcaactagatgt (seq id no: 8)
ANGPTL4	21536396a1TCCTGGGACGAGATGAATGTC (SEQ ID NO: 9)	CTGAGCCTTGAGTTGTGTCTG (SEQ ID NO: 10)
ANPEP	4502095a1GCACAATCATCGCACTGTCAG (SEQ ID NO: 11)	CGCTTTACTTTGGTCCAAGGT (SEQ ID NO: 12)
BAI1	4502355a1GCGGCGCTACACTCTCTAC (SEQ ID NO: 13)	AGCACCTCGTCGAAGCTCT (SEQ ID NO: 14)
CCL11	4506827a1ATACCCCTTCAGCGACTAGAG (SEQ ID NO: 15)	GCTTTGGAGTTGGAGATTTTTG (SEQ ID NO: 16)
CCL2	4506841a1CAGCCAGATGCAATCAATGCC (SEQ ID NO: 17)	TGGAATCCTGAACCCACTTCT (SEQ ID NO: 18)
CDH5	4502727a1GATCAAGTCAAGCGTGAGTCG (SEQ ID NO: 19)	AGCCTCTCAATGGCGAACAC (SEQ ID NO: 20)
COL18A1	13385620a1GCTGAACCTGAACTGGCTTTG (SEQ ID NO: 21)	GACACCGGCAATGTTCTCCTC (SEQ ID NO: 22)
COL4A3	10835113a1CAGCTCTGATGCCAATGAACA (SEQ ID NO: 23)	TTGCACGTTCCTCTTCCATGA (SEQ ID NO: 24)
dl14	9506545alTCCAACTGCCCTTCAATTTCAC (SEQ ID NO: 25)	CTGGATGGCGATCTTGCTGA (SEQ ID NO: 26)
CXCL10	4504701a1GTGGCATTCAAGGAGTACCTC (SEQ ID NO: 27)	GCCTTCGATTCTGGATTCAGAC (SEQ ID NO: 28)
CXCL3	4504157a1CGCCCAAACCGAAGTCATAG (SEQ ID NO: 29)	GCTCCCCTTGTTCAGTATCTTT
CXCL5	4506849a1GAGAGCTGCGTTGCGTTTG (SEQ ID NO: 31)	TTTCCTTGTTTCCACCGTCCA
CXCL6	4506851a1AGAGCTGCGTTGCACTTGTT (SEQ ID NO: 33)	GCAGTTTACCAATCGTTTTGGG

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TABLE 13-continued

	REAL TIME PCR PRIMERS					
Gene	PrimerBank ID Forward Primer	Reverse Primer				
CXCL9	4505187a1CCAGTAGTGAGAAAGGGTCGC (SEQ ID NO: 35)	TGGGGCAAATTGTTTAAGGTCTT (SEQ ID NO: 36)				
TYMP	4503445a1AGCTGGAGTCTATTCCTGGATT (SEQ ID NO: 37)	GGCTGCATATAGGATTCCGTC (SEQ ID NO: 38)				
S1PR1	13027636a1CTTGCTGACCATTTGGAAAACC (SEQ ID NO: 39)	CTGTGTAGGCTACTCCTGCC (SEQ ID NO: 40)				
EFNA1	33359680a1CGGAGAAGCTGTCTGAGAAGT (SEQ ID NO: 41)	CTGAGGACTGTGAGAGATGTAGT (SEQ ID NO: 42)				
EFNA3	4826708a1TCTCTGGGCTACGAGTTCCAC (SEQ ID NO: 43)	ACGTTGATCTTCACATTGGGG (SEQ ID NO: 44)				
EFNB2	4758250a1ACTGCTGGGGTGTTTTGATGG (SEQ ID NO: 45)	TGTGGGTATAGTACCAGTCCTTG (SEQ ID NO: 46)				
EGF	4503491a1AAGGTACTCTCGCAGGAAATGG (SEQ ID NO: 47)	ACATACTCTCTCTTGCCTTGACC (SEQ ID NO: 48)				
ENG	4557555a1AGCCCCACAAGTCTTGCAG (SEQ ID NO: 49)	GCTAGTGGTATATGTCACCTCGC (SEQ ID NO: 50)				
EPHB4	32528301a1CGGCAGCCTCACTACTCAG (SEQ ID NO: 51)	TCCCATTTTGATGGCCCGAAG (SEQ ID NO: 52)				
EREG	4557567a1CTGCCTGGGTTTCCATCTTCT (SEQ ID NO: 53)	GCCATTCATGTCAGAGCTACACT (SEQ ID NO: 54)				
FGF1	4503697a1ACACCGACGGGCTTTTATACG (SEQ ID NO: 55)	CCCATTCTTCTTGAGGCCAAC (SEQ ID NO: 56)				
FGF2	15451898a1AGAAGAGCGACCCTCACATCA (SEQ ID NO: 57)	ACTGCCCAGTTCGTTTCAGTG (SEQ ID NO: 58)				
FGFR3	4503711a1TCCTTGCACAACGTCACCTTT (SEQ ID NO: 59)	GCAGAGTGATGAGAAAACCCAA (SEQ ID NO: 60)				
FIGF	4758378a1ACAGAGAGTGGGTAGTGGTGA (SEQ ID NO: 61)	GTTCCTCCAAACTAGAAGCAGC (SEQ ID NO: 62)				
FLT1	4503749a1CTGTCATGCTAATGGTGTCCC (SEQ ID NO: 63)	TGCTGCTTCCTGGTCCTAAAATA (SEQ ID NO: 64)				
HAND2	12545384a1ATGAGTCTGGTAGGTGGTTTTCC (SEQ ID NO: 65)					
HGF	33859835a1TACAGGGGCACTGTCAATACC (SEQ ID NO: 67)	GGATACTGAGAATCCCAACGC (SEQ ID NO: 68)				
HIF1A	4504385a1GGCGCGAACGACAAGAAAAAG (SEQ ID NO: 69)	CCTTATCAAGATGCGAACTCACA (SEQ ID NO: 70)				
HPSE	5729873a1TCCTGCGTACCTGAGGTTTG (SEQ ID NO: 71)	CAACCGTAACTTCTCCTCCAC (SEQ ID NO: 72)				
ID1	31317299a1ACGAGCAGCAGGTAAACGTG (SEQ ID NO: 73)	GAAGGTCCCTGATGTAGTCGAT (SEQ ID NO: 74)				
ID3	32171182a1AGTCCCGAGAGGCACTCAG (SEQ ID NO: 75)	GCTCCTTTTGTCGTTGGAGATG (SEQ ID NO: 76)				
IFNA1	13128950alGCCTCGCCCTTTGCTTTACT (SEQ ID NO: 77)	CTGTGGGTCTCAGGGAGATCA (SEQ ID NO: 78)				
IFNB1	4504603a1ATGACCAACAAGTGTCTCCTCC (SEQ ID NO: 79)	GCTCATGGAAAGAGCTGTAGTG (SEQ ID NO: 80)				
IFNG	10835171a1CTCTTGGCTGTTACTGCCAGG (SEQ ID NO: 81)	CTCCACACTCTTTTGGATGCT (SEQ ID NO: 82)				
IGF1	11024682a1ATGCTCTTCAGTTCGTGTGTG (SEQ ID NO: 83)	GCACTCCCTCTACTTGCGTTC (SEQ ID NO: 84)				

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TABLE 13-continued

	REAL TIME PCR PRIMERS					
	REAL TIME FOR PRIMER	72				
Gene	PrimerBank ID Forward Primer	Reverse Primer				
IL1B	10835145a1CTCGCCAGTGAAATGATGGCT (SEQ ID NO: 85)	GTCGGAGATTCGTAGCTGGAT (SEQ ID NO: 86)				
IL6	10834984a1AAATTCGGTACATCCTCGACGG (SEQ ID NO: 87)	GGAAGGTTCAGGTTGTTTTCTGC (SEQ ID NO: 88)				
IL8	10834978a1TTTTGCCAAGGAGTGCTAAAGA (SEQ ID NO: 89)	AACCCTCTGCACCCAGTTTTC (SEQ ID NO: 90)				
ITGAV	4504763alTCGGGACTCCTGCTACCTC (SEQ ID NO: 91)	CACGAGAAGAAACATCCGGGA (SEQ ID NO: 92)				
ITGB3	4557677a1AGGATGACTGTGTCGTCAGAT (SEQ ID NO: 93)	GGTAGACGTGGCCTCTTTATACA (SEQ ID NO: 94)				
JAG1	4557679a1TCGGGTCAGTTCGAGTTGGA (SEQ ID NO: 95)	AGGCACACTTTGAAGTATGTGTC (SEQ ID NO: 96)				
KDR	11321597a1GGCCCAATAATCAGAGTGGCA (SEQ ID NO: 97)	TGTCATTTCCGATCACTTTTGGA (SEQ ID NO: 98)				
LAMA5	21264602a1CCCACCGAGGACCTTTACTG (SEQ ID NO: 99)	GGTGTGCCTTGTTGCTGTT (SEQ ID NO: 100)				
LECT1	5901932a1GGTGGGACCTGATGACGTG (SEQ ID NO: 101)	AGCTCCCGAAATGAGGACCA (SEQ ID NO: 102)				
LEP	4557715a1GAACCCTGTGCGGATTCTTGT (SEQ ID NO: 103)	TCCATCTTGGATAAGGTCAGGAT (SEQ ID NO: 104)				
MDK	4505135a1CGCGGTCGCCAAAAAGAAAG (SEQ ID NO: 105)	CAGTCGGCTCCAAACTCCT (SEQ ID NO: 106)				
MMP2	11342666a1CCGTCGCCCATCATCAAGTT (SEQ ID NO: 107)	CTGTCTGGGGCAGTCCAAAG (SEQ ID NO: 108)				
MMP9	4826836a1TGGCAGAGATGCGTGGAGA (SEQ ID NO: 109)	GGCAAGTCTTCCGAGTAGTTTT (SEQ ID NO: 110)				
Notch4	27894370alGGGTGAGACGTGCCAGTTTC (SEQ ID NO: 111)	CTGGGTGTCAATGGAGAGGGA (SEQ ID NO: 112)				
NRP1	4505457alTGGGGCTCTCACAAGACCTT (SEQ ID NO: 113)	AGCTTGGGAATAGATGAAGTTGC (SEQ ID NO: 114)				
NRP2	4505459alGAAGGGAACATGCACTATGACA (SEQ ID NO: 115)	AGCGTTTTTACCGTGGGCTT (SEQ ID NO: 116)				
PDGFA	15208658a1CCAGCGACTCCTGGAGATAGA (SEQ ID NO: 117)	CTTCTCGGGCACATGCTTAGT (SEQ ID NO: 118)				
PECAM1	21314617a1AACAGTGTTGACATGAAGAGCC (SEQ ID NO: 119)	TGTAAAACAGCACGTCATCCTT (SEQ ID NO: 120)				
PGF	20149543a1TGCTGCGGCGATGAGAATC (SEQ ID NO: 121)	GTCTCCTCCTTTCCGGCTT (SEQ ID NO: 122)				
PLAU	4505863a1GTGAGCGACTCCAAAGGCA (SEQ ID NO: 123)	GCAGTTGCACCAGTGAATGTT (SEQ ID NO: 124)				
PLG	4505881a1CAGGGGGCTTCACTGTTCAG (SEQ ID NO: 125)	GCCATTATCACACATTGTTGCTC (SEQ ID NO: 126)				
PLXDC1	15011862a1CCTGGGCATGTGTCAGAGC (SEQ ID NO: 127)	GGTGTTGGAGAGTATTGTGTGG (SEQ ID NO: 128)				
PROK2	17530787a1GTGACAAGGACTCCCAATGTG (SEQ ID NO: 129)	TCTTGACCCAGATACTGACAGC (SEQ ID NO: 130)				
PTGS1	18104967a1CTCCCAGGAGTACAGCTACGA (SEQ ID NO: 131)	CCAGCAATCTGGCGAGAGA (SEQ ID NO: 132)				
SERPINF1	34098938a1GCCCTGGTGCTACTCCTCT (SEQ ID NO: 133)	CAGCTTGTTCACGGGGACTTT (SEQ ID NO: 134)				

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TABLE 13-continued

	TABLE 13-continue	
Gene	PrimerBank ID Forward Primer	Reverse Primer
SPHK1	21361088a1AGGCTGAAATCTCCTTCACGC (SEQ ID NO: 135)	GTCTCCAGACATGACCACCAG (SEQ ID NO: 136)
STAB1	12225240a1ACATCTGCTCGAACCCAAACA (SEQ ID NO: 137)	GACAGCGACATCTGGCAACA (SEQ ID NO: 138)
TEK	4557869a1TGCCACCCTGGTTTTTACGG (SEQ ID NO: 139)	TTGGAAGCGATCACACATCTC (SEQ ID NO: 140)
TGFA	4507461a1GGCCCTGGCTGTCCTTATC (SEQ ID NO: 141)	AGCAAGCGGTTCTTCCCTTC (SEQ ID NO: 142)
TGFB1	10863873a1GGCCAGATCCTGTCCAAGC (SEQ ID NO: 143)	GTGGGTTTCCACCATTAGCAC (SEQ ID NO: 144)
TGFB2	4507463a1CTGCATCTGGTCACGGTCG (SEQ ID NO: 145)	CCTCGGGCTCAGGATAGTCT (SEQ ID NO: 146)
TGFBR1	4759226a1ACGGCGTTACAGTGTTTCTG (SEQ ID NO: 147)	GCACATACAAACGGCCTATCT (SEQ ID NO: 148)
THBS1	4507485a1TGCCTGATGACAAGTTCCAAG (SEQ ID NO: 149)	CCAGAGTGGTCTTTCCGCTC (SEQ ID NO: 150)
THBS2	4507487a1ACAAAGACACGACCTTCGACC (SEQ ID NO: 151)	GACTTGCCGTCCTGCTTGA (SEQ ID NO: 152)
TIMP1	4507509a1CTTCTGCAATTCCGACCTCGT (SEQ ID NO: 153)	CCCTAAGGCTTGGAACCCTTT (SEQ ID NO: 154)
TIMP2	4507511a1AAGCGGTCAGTGAGAAGGAAG (SEQ ID NO: 155)	TCCTCTTGATAGGGTTGCCATA (SEQ ID NO: 156)
TIMP3	4507513a1CAACTCCGACATCGTGATCCG (SEQ ID NO: 157)	GAAGCCTCGGTACATCTTCATC (SEQ ID NO: 158)
TNF	25952111a1ATGAGCACTGAAAGCATGATCC (SEQ ID NO: 159)	GAGGGCTGATTAGAGAGAGGTC (SEQ ID NO: 160)
TNFAIP2	26051240a1TCCCCGAGAGCGTCTTTCT (SEQ ID NO: 161)	ATGTCATTGGGGTAGAGGTTCT (SEQ ID NO: 162)
VEGFA	30172564a1CAACATCACCATGCAGATTATGC (SEQ ID NO: 163)	GCTTTCGTTTTTGCCCCTTTC (SEQ ID NO: 164)
VEGFC	4885653a1CACGGCTTATGCAAGCAAAGA (SEQ ID NO: 165)	TCCTTTCCTTAGCTGACACTTGT (SEQ ID NO: 166)
CD248	9966885a1TGCGAACACGAATGTGTGGA (SEQ ID NO: 167)	CAATCTGGCACTCATCTGTGTC (SEQ ID NO: 168)
GPR124	20521932a1TGAGCAATAACAAGATCACGGG (SEQ ID NO: 169)	TCGGAGGTGAGACAGCCAA (SEQ ID NO: 170)
PLXDC1	15011862a1CCTGGGCATGTGTCAGAGC (SEQ ID NO: 171)	GGTGTTGGAGAGTATTGTGTGG (SEQ ID NO: 172)
ANTXR1	14149904a1CGGTAGACGCCTCTTATTATGGT (SEQ ID NO: 173)	CCTTTTCCAACTTAGCACCTTCT (SEQ ID NO: 174)
RASD2	22027486a1CAGTGTGCCCGCCAAAAAC (SEQ ID NO: 175)	TGGGTGTGTACTGGTCCTCAA (SEQ ID NO: 176)
ARHGEF17	21361458a1CGACTCTGAATCCCCAGGAAC (SEQ ID NO: 177)	CCTGCGGTTGGGAGAAGATA (SEQ ID NO: 178)
TNS3	21739317a1GGCATTACCCCGTGAACAGT (SEQ ID NO: 179)	CACCCGATGTCTCTGTGAT (SEQ ID NO: 180)
DKK3	27735014a1TGGGGTCACTGCACCAAAAT (SEQ ID NO: 181)	GAAGGTCGGCTTGCACACATA (SEQ ID NO: 182)
MMP11	5174581a1GAGGCCCTAAAGGTATGGAGC (SEQ ID NO: 183)	CCCTTCTCGGTGAGTCTTGG (SEQ ID NO: 184)

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TABLE 13-continued

	REAL TIME PCR PRIMERS					
Gene	PrimerBank ID Forward Primer	Reverse Primer				
NID1	28374139a1CACATTGAGCCCTACACGGAG (SEQ ID NO: 185)	GCTGAGAGCATAGCGCAAGAT (SEQ ID NO: 186)				
THY1	19923362a1TCGCTCTCCTGCTAACAGTCT (SEQ ID NO: 187)	CTCGTACTGGATGGGTGAACT (SEQ ID NO: 188)				
CST4	4503109a1CCTCTGTGTACCCTGCTACTC (SEQ ID NO: 189)	CTTCGGTGGCCTTGTTGTACT (SEQ ID NO: 190)				
MRC2	5174485a1CCGAAACCGGCTATTCAACCT (SEQ ID NO: 191)	CAGCGAAGATTCAGTGCTTCC (SEQ ID NO: 192)				
TNS1	13624033a1TAGATGGGAGCCTGTATGCTAAG (SEQ ID NO: 193)	GTAGGACGTGTGGCATTAACA (SEQ ID NO: 194)				
BMP1	18027738a1CTCTCTCGTTTCAGAAAAGAGGC (SEQ ID NO: 195)	TTCCTGAGTAACAAGGGGTCC (SEQ ID NO: 196)				
COMT	4502969a1TACTGCGAGCAGAAGGAGTG (SEQ ID NO: 197)	CCAGCGAAATCCACCATCC (SEQ ID NO: 198)				
PTPRCAP	5032005a1AGCTGGGGTCCACAGACAA (SEQ ID NO: 199)	GACGCCTCTCCACATTGCT (SEQ ID NO: 200)				
57722	10047333a1GCGAGCAGATCATCGGCTT (SEQ ID NO: 201)	TGCAAACTGGTATTCCACATTGT (SEQ ID NO: 202)				
EXTL3	4503617a1CGCTCATCGCCCACTATTACC (SEQ ID NO: 203)	TGTTCAGCTCTTGGCGCTT (SEQ ID NO: 204)				
vWF	4507907a1AGCCTTGTGAAACTGAAGCAT (SEQ ID NO: 205)	GGCCATCCCAGTCCATCTG (SEQ ID NO: 206)				
PNMT	4505921a1GCAGACCGTAGCCCCAATG (SEQ ID NO: 207)	GCGTAGTTGTTGCGGAGGTA (SEQ ID NO: 208)				
58488	13477277a1CGGTGCCTCCAAGTGACTG (SEQ ID NO: 209)	AGGCTGAACTCCTGTGACCTT (SEQ ID NO: 210)				
1tbp4	22759983alTATGCTGGTTCCCTGGCTGA (SEQ ID NO: 211)	GGCCTCATCACACTCGTTG (SEQ ID NO: 212)				
23001	16550629alTCTTGCGGTGGAACAGAATAAG (SEQ ID NO: 213)	GCATAGCCCCAAGCAAAAGTT (SEQ ID NO: 214)				
4247	4505163a1GTGCATAACCGGCCCGAATA (SEQ ID NO: 215)	AACCGGACAGAAATTCACCCC (SEQ ID NO: 216)				
Sdc4	4506861a1GCTCTTCGTAGGCGGAGTC (SEQ ID NO: 217)	CCTCATCGTCTGGTAGGGCT (SEQ ID NO: 218)				
ralb		CGTCATACATGAACTGAAGCGTC (SEQ ID NO: 220)				
DGKG	4503315a1GGTGAAGAACGGTGGGTCTC (SEQ ID NO: 221)	AATCGGCTCATGTGGGTCATA (SEQ ID NO: 222)				
TRA2B	21758154a1CCCCTGCAAAGTCTCGCTC (SEQ ID NO: 223)	AATCTCGACTGTAAGACCTGCTA (SEQ ID NO: 224)				
CLIC1	14251209a1ACAACCGCAGGTCGAATTGTT (SEQ ID NO: 225)	GTGACTCCCTTGAGCCACA (SEQ ID NO: 226)				
90780	23510333a1CCAGAAAAGAAGCGAAGGAAGT (SEQ ID NO: 227)	TCCGAAGTCATCTTCAAAAGGG (SEQ ID NO: 228)				
5569		CTGTAGAACTTCGTTGTGCATCT				
151516		ATTGGCCCCATCAAAAGGTTC (SEQ ID NO: 232)				
CALD1		TGTCCCAAGGATTCTTCCTCC (SEQ ID NO: 234)				

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TABLE 13-continued

	REAL TIME PCR PRIMERS						
Gene	PrimerBank ID Forward Primer	Reverse Primer					
DUT	2443580a1CGCCATTTCACCCAGTAAGC (SEQ ID NO: 235)	AGCCACTCTTCCATAACACCC (SEQ ID NO: 236)					
copa	23512328a1TCAGCTTTCACCCCAAAAGAC (SEQ ID NO: 237)	CACATCCGATAGTCCCATAACTG (SEQ ID NO: 238)					
PDCD2	21735594a1CCGGCCTGCGAGTTTTTAG (SEQ ID NO: 239)	GGGGGAGGATTCTCAGAAGGT (SEQ ID NO: 240)					
151516	22758146a1TTCGAGAGGCCCCGTTTTC (SEQ ID NO: 241)	ATTGGCCCCATCAAAAGGTTC (SEQ ID NO: 242)					
VGLL4	6633997a1AATATCGGCATTCTGTGCTACG (SEQ ID NO: 243)	GCAGGGTCTGTATTCTGGGT (SEQ ID NO: 244)					
APOE	4557325a1GTTGCTGGTCACATTCCTGG (SEQ ID NO: 245)	GGTAATCCCAAAAGCGACCCA (SEQ ID NO: 246)					
8131	6912302a1CAGCCCCATCAGCGTGATT (SEQ ID NO: 247)	GCGGCTTACTTGTCTGGGAC (SEQ ID NO: 248)					
10988	21750170a1AGACCCTCCCTCAGTTCCAAT (SEQ ID NO: 249)	GGGTATTCGCATTCTTGTCCTT (SEQ ID NO: 250)					
9569	15011924a1CTGCTCTTCAACACACGATACG (SEQ ID NO: 251)	CCCTCTCTTGACTATCCACGAT (SEQ ID NO: 252)					
Acvr11	4557243a1CCAACCTCCTTCGGAGCAG (SEQ ID NO: 253)	CTGTGGTGCAGTCACTGTCC (SEQ ID NO: 254)					
Adcy4	24497587a1AGCTGACCTCAGACCCGAG (SEQ ID NO: 255)	CATACGCCGTGAAGATGACGA (SEQ ID NO: 256)					
Calcr1	5031621a1AAGACCCCATTCAACAAGCAG (SEQ ID NO: 257)	CCAGTTTCCATCTTGGTCACAG (SEQ ID NO: 258)					
Caskin2	24638431a1CTGATCCTCGCCGTCAAGAAT (SEQ ID NO: 259)	GTTCACGTTGAGCCTCTTTGT (SEQ ID NO: 260)					
Ccbp2	13929467a1CTGAGGATGCCGATTCTGAGA (SEQ ID NO: 261)	TAACGGAGCAAGACCATGAGA (SEQ ID NO: 262)					
Cldn5	17939486a1CTCTGCTGGTTCGCCAACAT (SEQ ID NO: 263)	CAGCTCGTACTTCTGCGACA (SEQ ID NO: 264)					
01839	4503413a1CCCTCCCACTGTATCCACG (SEQ ID NO: 265)	AGTGACTCTCAAAAGGTCCAGA (SEQ ID NO: 266)					
Egf17		CCCTCCTAGCACTGCATTCAT (SEQ ID NO: 268)					
Ehd4	21264315a1CTGCTCTTTGACGCTCACAAG (SEQ ID NO: 269)	GTCGGCCTTATTCAGCACG (SEQ ID NO: 270)					
Entpd1	4741547a1CAACTATCTGCTGGGCAAATTCA (SEQ ID NO: 271)	AGGCAGGTCTGGATTGAGTTATAC (SEQ ID NO: 272)					
Epas1	16198412a1TTTCACACGGCACATTTGGAC (SEQ ID NO: 273)	GTGGACGGGGTCACTATACC (SEQ ID NO: 274)					
Erg	4758300a1CCAGCAGCTCATATCAAGGAAG (SEQ ID NO: 275)	GTTCCGTAGGCACACTCAAAC (SEQ ID NO: 276)					
ESAM1	20452464a1CCCCTGGTGACCAACTTGC (SEQ ID NO: 277)	TGGGATGAAGACACCTCCCC (SEQ ID NO: 278)					
Fgd5	34365081a1AGCCCCTATGAGTTCTTCCCA (SEQ ID NO: 279)	GTGCCTGCTCTGATTCTAAACC (SEQ ID NO: 280)					
Gpr116	4886491a1TGCACTGAACTGGAATTACGAG (SEQ ID NO: 281)	CAGCCGTAGGACTTTTTGTGG (SEQ ID NO: 282)					
Hspa12b	31317303a1CACCCTCGCAGTCTCCAAAA (SEQ ID NO: 283)	GAAAGCATAGCCACTAGACGTG (SEQ ID NO: 284)					

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TABLE 13-continued

	TABLE 13-CONCINUE					
REAL TIME PCR PRIMERS						
Gene	PrimerBank ID Forward Primer	Reverse Primer				
Icam1	4557878alTCTGTGTCCCCCTCAAAAGTC (SEQ ID NO: 285)	GGGGTCTCTATGCCCAACAA (SEQ ID NO: 286)				
Icam2	4504557alCGGATGAGAAGGTATTCGAGGT (SEQ ID NO: 287)	CACCCACTTCAGGCTGGTTAC (SEQ ID NO: 288)				
Kifc1	33875771a1GAGCCGTGCGAGTTCTCTAC (SEQ ID NO: 289)	GGCCTTAATCAGAGGTCTCTTCA (SEQ ID NO: 290)				
Lats2	18959200a1ACTTTTCCTGCCACGACTTATTC (SEQ ID NO: 291)	ATCCAGGGAAGTGTCACTGTT (SEQ ID NO: 292)				
Lrrk1	14017797a1GCCCGACAACGACATCAAG (SEQ ID NO: 293)	GCCAAATAGGGTCGAGGAAGTA (SEQ ID NO: 294)				
Mmrn2	13376091a1GGACCCCGTTGGACGTAAC (SEQ ID NO: 295)	CTTGACCTGGTACACTGGCTT (SEQ ID NO: 296)				
Myo1b	2764617a1TGGCCTCATTGGAAAGGACC (SEQ ID NO: 297)	CCAGGCGTTGCTTCCTCAG (SEQ ID NO: 298)				
PALD	20521820a1GGCTGCTGGCAGACTATGG (SEQ ID NO: 299)	TGGACTTGGCCTTGCTGTTAT (SEQ ID NO: 300)				
NM_023516	16041779a1GCTGACCCTGCTTGGCTTAT (SEQ ID NO: 301)	CCCTCGCCATACCGATGTATTA (SEQ ID NO: 302)				
55332		ATCGTGGCTGCACCAAGAAA (SEQ ID NO: 304)				
CTTNBP2NL	24308179a1AGCCTGAACTCCTGACACTAT (SEQ ID NO: 305)	TGCTTTTCGCCATCATTTTTCTC (SEQ ID NO: 306)				
CENTD3	21264337a1GTATGCAGACACGTTCCGAC (SEQ ID NO: 307)	CAGGCGTAGAATGCGTTTCC (SEQ ID NO: 308)				
Clorf54	13375758a1ACAGTCACCCCCAGTTATGAT (SEQ ID NO: 309)					
134265	18676718a1TGTGGGTGACAACTGTTCTACC (SEQ ID NO: 311)					
Npr3	4505441a1TGCTCACTTTCTCCCCGTG (SEQ ID NO: 313)	GGGCAGTAACACCAGCACC (SEQ ID NO: 314)				
Pltp	33356541a1TCACAGAGCTGCAACTGACAT (SEQ ID NO: 315)					
Ptprb	30410925a1CATGGTGATTCTTACCTGCTTGA (SEQ ID NO: 317)	CCCACGACCACTTTCTCATTTT (SEQ ID NO: 318)				
Ptprm	18860904a1TCCAGCAAGAGTAATTCTCCTCC (SEQ ID NO: 319)	GTACGTGTTGGGTCTCCAGATA (SEQ ID NO: 320)				
GRRP1	19343581a1TCAAGACGCACCAGGTGATAG (SEQ ID NO: 321)	CGGTAGAAGATGAGGGAATCAGG (SEQ ID NO: 322)				
stard9	7242955a1CTCATGCTTATTCCTCCCATTCC (SEQ ID NO: 323)	AGGGTGGGTGGATAGTATGTG (SEQ ID NO: 324)				
Ramp2	5032021a1CTGGGCGCTGTCCTGAATC (SEQ ID NO: 325)	CAATCTCGCAGGGTGCTATAAG (SEQ ID NO: 326)				
Rasip1	27469793a1TCTGGTGAACGGAAGGAGG (SEQ ID NO: 327)	CGAAGAAGACTTGACAGAGGC (SEQ ID NO: 328)				
Robo4	18676674a1GTGGGTGAGCAGTTTACTCTG (SEQ ID NO: 329)	GCCAGGGGTTTCCCATCTTTC (SEQ ID NO: 330)				
Sdpr	4759082a1CATCCGGGACAACTCACAGG (SEQ ID NO: 331)	CTCCAAACTGATCTGTCGCTG (SEQ ID NO: 332)				
Slc43a3	6650786alTCAGCCCCGAGGATGGTTT (SEQ ID NO: 333)	AAGGCTAAGTGCAAGGAGACA (SEQ ID NO: 334)				

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TABLE 13-continued

	REAL TIME PCR PRIMERS						
Gene	PrimerBan ID	k Forward Pı	rimer	Reverse Primer			
Slc9a3r2	2047328a	1GCTCCGAAGO		GGGACTTGTCACTATGCAGGTT (SEQ ID NO: 336)			
Slco2a1	26996627a	1GGGCAGCGAC	CACCTCTACTA ): 337)	TGGAAATGAGACCCGATGAAGAA (SEQ ID NO: 338)			
B2M	4757826a	1GGCTATCCAC	GCGTACTCCAAA ): 339)	CGGCAGGCATACTCATCTTTTT (SEQ ID NO: 340)			
HPRT1	4504483a	1CCTGGCGTCC	GTGATTAGTGAT ): 341)	AGACGTTCAGTCCTGTCCATAA (SEQ ID NO: 342)			
RPL13A	6912634a	1CGAGGTTGG( (SEQ ID NO		CTTCTCGGCCTGTTTCCGTAG (SEQ ID NO: 344)			
GAPDH	7669492a	1ATGGGGAAGO (SEQ ID NO		GGGGTCATTGATGGCAACAATA (SEQ ID NO: 346)			
ACTB	4501885a	1CATGTACGTT (SEQ ID NO	GCTATCCAGGC ): 347)	CTCCTTAATGTCACGCACGAT (SEQ ID NO: 348)			

TABLE 14

TABLE 14-continued

		IAL	)LL 14						1.	ADLE I	4-COIIII	lucu		
	EFFECT ON ANGI	S OF ANT							EFFECT ON ANGI	S OF ANT				
NSC:	19630	122567	150117	259969	292222	292596	30	NSC:	19630	122567	150117	259969	292222	292596
AKT1	0.1	-1.6	1.6	-1.4	0.7	-0.8		B2M	0.0	0.1	2.8	1.2	-0.4	-2.0
ANGPT1	-0.5	1.6	1.7	1.4	0.9	2.2		HPRT1	0.8	0.0	-0.4	0.6	0.3	-0.5
ANGPT2	-1.8	-0.9	-1.2	0.9	-1.3	0.8		RPL13A	-0.2	0.7	-0.8	1.2	0.7	1.9
ANGPTL3	-5.0	-1.7	1.8	3.6	0.6	1.0		GADPH	0.1	-0.7	-1.3	-1.0	-0.1	0.3
ANGPTL4	-0.2	-0.4	-4.0	1.5	1.3	-3.2	35	ACTB	0.1	-1.0	-0.9	-2.5	-0.8	0.0
ANPEP	-0.4	-1.2	$\frac{-1.7}{-1.7}$	0.2	-0.6	0.8		IL6	3.5	14.4	2.2	9.4	3.0	3.7
BAL1	-0.9	0.2	0.8	0.4	0.2	1.7		IL8	3.0	7.4	6.0	11.3	13.9	5.1
CCL11	-0.3	0.6	0.7	0.0	0.2	2.1		ITGAV	-0.3	$-\overline{2.7}$	-1.8	-0.9	1.2	-0.9
CCL2	2.3	2.5	0.9	3.6	0.9	2.4		ITGB3	-0.9	-1.4	-1.4	-2.9	2.5	-1.8
CDH5	-0.2	$-\overline{1.9}$	-1.6	$-\overline{1.6}$	-0.1	-0.2		JAG1	-1.2	0.6	0.3	1.7	1.6	0.5
COL18A1	0.4	1.6	0.8	1.9	1.2	2.3	40	KDR	-2.7	-2.3	-2.1	-0.5	-1.2	-1.8
COL4A3	0.1	1.9	2.4	3.2	2.0	1.9	40	LAMAS5	-0.8	-1.1	-2.2	-0.8	-0.4	-0.3
DLL4	-4.5	$-\frac{8.7}{8.7}$	5.5	-4.1	-2.2	-6.6		LECT1	-0.4	0.3	-0.2	-8.0	1.4	1.4
CXCL10	4.7	3.7	-1.7	2.8	0.8	2.5		LEP	-4.5	0.2	-0.2	0.8	-0.6	2.6
CXCL3	12.1	4.0	0.8	11.6	5.0	-3.8		MDK	-1.1	-0.9	-1.5	-1.0	0.8	-1.5
CXCL5	4.8	4.3	-3.5	10.2	3.4	5.6		MMP2	0.5	0.3	-0.6	-0.1	2.8	1.1
CXCL6	-0.5	1.1	1.2	1.0	0.4	2.2		MMP9	0.3	0.9	-0.3	4.3	3.3	1.8
CXCL9	-1.0	1.6	1.2	0.5	0.4	1.5	45	Notch4	-1.8	-1.1	-0.7	-0.3	-0.4	-0.6
TYMP	0.3	-0.3	-1.1	0.1	-0.1	-5.5		NRP1	-0.5	-3.0	-2.0	-2.6	0.8	-2.3
S1PR1	-2.6	-0.7	-1.9	-0.3	-0.3	0.2		NRP2	<u>-2.2</u>	$\frac{-3.8}{-4.3}$	-3.2	-3.5	1.0	$\frac{-3.3}{-3.2}$
EFNA1	3.7	-0.3	0.4	7.8	0.9	3.1		PDGFA	$\frac{-0.7}{-0.7}$	$\frac{-1.7}{-1.7}$	-0.9	1.1	1.6	4.0
EFNA3	-0.4	-0.4	-1.8	$\frac{7.8}{0.3}$	0.1	0.5		PECAM1	-2.6	$\frac{1.7}{-2.7}$	<u>-2.5</u>	-3.0	-0.7	-1.8
EFNB2	-1.9	-4.0	0.4	-6.6	-2.2	-3.4		PGF	$\frac{2.0}{-2.4}$	$\frac{-2.7}{-4.9}$	$\frac{2.5}{-1.6}$	-7.2	0.6	-1.7
EGF	$\frac{1.5}{-1.0}$	$\frac{-0.3}{-0.3}$	-2.3	0.2	2.8	2.2	50	PLAU	0.1	$\frac{-0.1}{-0.1}$	0.0	3.8	2.7	-0.2
ENG	0.1	-1.7	-0.1	-0.7	-0.9	-0.3		PLG	-2.7	-1.5	-3.9	$-\frac{3.6}{1.0}$	-0.7	-0.4
EPHB4	-0.8	-0.5	-1.2	0.3	-0.5	0.9		PLXDC1	-4.0	0.7	-3.2	2.3	-0.1	0.3
EREG	7.6	1.9	-2.4	9.3	5.0	9.6		PROK2	-1.3	1.3	0.7	2.2	1.9	2.0
FGF1	-3.0	1.9	-3.8	5.7	-1.4	4.8		PTGS1	-2.4	0.8	0.3	2.9	2.0	1.1
FGF2	1.7	$-\frac{1.5}{0.7}$	0.0	2.5	-0.6	2.5		SERPINF1	-0.8	0.2	1.5	6.5	2.3	0.7
FGFR3	-0.2	1.2	1.0	1.2	0.8	2.2		SPHK1	-0.5	0.9	1.2	3.2	2.0	1.8
FIGF	-3.2	-0.1	2.4	0.2	0.0	1.7	33	STAB1	-1.0	-1.7	-0.9	0.5	0.2	-0.5
FLT1								TEK	-0.4				2.0	
	$\frac{-2.1}{0.5}$	<u>-4.4</u>	-0.5	-0.7	-0.2	-1.9				0.3	0.7	1.6		1.3
HAND2	-0.5	0.4	1.5	1.4	1.0	1.7		TGFA	1.1	2.0	5.3	8.7	-3.4	<u>8.9</u>
HGF	-0.3	1.3	1.5	1.5	1.3	2.2		TGFB1	-1.3	-1.2	-1.3	0.3	1.1	-0.8
HIF1A	-1.7	<u>-3.1</u>	-1.8	0.7	-0.7	-2.1		TGFB2	-0.5	1.2	1.6	1.3	1.9	2.1
HPSE	0.6	<u>-8.3</u>	-0.2	2.6	1.6	-0.3	60	TGFBR1	-0.1	1.2	1.2	1.1	1.8	1.4
ID1	1.0	-0.2	0.3	1.5	0.0	4.0		THBS1	0.5	0.1	-0.6	-0.1	1.1	-0.1
ID3	0.4	-0.3	0.5	<u>2.5</u>	-0.2	1.0		THBS2	-0.6	1.2	0.9	2.6	1.9	1.1
IFNA1	0.4	1.1	1.9	1.1	0.8	2.2		TIMP1	-0.8	-1.4	-0.7	2.5	1.6	1.4
IFNB1	-0.4	1.2	2.1	1.6	1.1	2.6		TIMP2	-0.9	-1.4	-0.8	0.0	1.1	0.4
IFNG	4.7	8.3	-1.9	6.0	3.1	6.5		TIMP3	0.7	-4.3	-2.7	-0.6	-0.4	-1.2
IGF1	3.6	-0.1	-0.2	$-\frac{0.6}{2.6}$	6.0	0.6	65		-0.6	-0.2	2.4	9.3	1.0	6.1
IL1B	0.2	-0.1	9.5	1.3	4.3	-4.1		TNFAIP2	0.2	-1.0	-0.6	4.6	0.6	-0.2
11111	0.2	-0.1	2.3	1.5	4.5	-4.1		11N17A11 Z	0.2	-1.0	-0.0	4.0	0.0	-0.2

	T.	<b>1</b> ABLE 1	<b>19</b> 4-contin	nued					T.	<b>1</b> ABLE 1	<b>20</b> 4-contin	nued		
	EFFECT ON ANGI	S OF ANT						EFFECTS OF ANTIANGIOGENIC SMs ON ANGIOGENEIS GENE EXPRESSION						
NSC:	19630	122567	150117	259969	292222	292596	5	NSC:	19630	122567	150117	259969	292222	292596
TNFAIP2	-0.4	-1.1	2.7	4.7	0.2	-0.1	•	Icam2	0.4	0.1	0.0	7.5	0.1	-0.4
VEGFA VEGFC	4.2 0.1	4.9 1.8	-0.3	$\frac{5.7}{1.9}$	3.2 2.7	0.4 1.6		Kifc1 Lasts2	3.4 -0.1	1.1 4.8	-0.1 0.3	-4.8 1.5	0.5 0.1	1.6 0.4
ROBO4	0.1	0.0	$\frac{2.0}{-0.2}$	-4.1	1.1	-1.2		Lirk1	-2.9	-0.5	-1.8	0.3	-0.1	-1.5
EphB1	0.0	0.8	0.7	0.6	0.9	0.4	10		-2.4	<u>-3.5</u>	-3.4	-7.5	-1.0	<u>-2.4</u>
B2M	-0.1	-0.2	-1.2	1.5	1.3	-1.6	10	Myo1b	-2.3	-2.9	-2.7	<u>-3.0</u>	-1.5	-2.0
HPRT1	0.9	0.0	0.6	-0.5	1.4	0.1		PALD	-1.1	-0.5	-1.7	-1.3	1.8	-1.9
RPL13A	0.3	1.2	0.1	0.7	1.7	1.5		NM_023516	0.5	0.2	0.6	0.9	0.4	0.2
GADPH	-0.3	-0.8	-0.1	0.0	1.4	0.8		55332	-1.1	-1.0	-1.7	0.1	2.4	-8.6
ACTB	-0.3	-1.0	-0.6	-2.2	-6.3	-0.4		CTTNBP2NL	<u>-2.3</u>	-0.9	<u>-2.3</u>	-1.0	0.2	-3.4
CD248	1.3	1.2	-0.4	0.6	1.3	0.2	15	CENTD3	0.6	1.1	-0.2	-1.0	-0.5	0.1
GPCR124 PLXDC1	-1.7 -5.7	$\frac{-3.7}{-1.7}$	-2.9 -0.6	$\frac{-4.6}{-2.4}$	$\frac{-1.9}{0.3}$	-6.7 0.2		C1orf54	-4.8	-3.4	-1.3	<u>-6.1</u>	-0.1	-2.2
ANTXR1	-0.3	-3.5	-4.2	$\frac{-2.4}{-1.4}$	-0.2	-2.1		134265	-1.6	-0.2	-1.0	-0.6	-1.3	-1.6
RASD2	0.9	0.5	-0.1	0.5	0.3	-0.5		Npr3	8.3	1.5	0.5	<u>2.7</u>	0.9	0.7
ARHGEF17	0.2	-5.0	-2.0	-0.8	-0.9	-1.6		Pltp	0.9	1.5	0.9	1.4	0.4	0.5
TNS3	-1.8	2.0	0.6	<del>-8.0</del>	0.5	1.3		Ptprb	<u>-1.6</u>	0.5	-2.6	-0.1	0.3	-1.9
DKK3	-1.5	-1.9	<u>-3.3</u>	-2.7	-1.1	-0.4	20	- ·I·	-1.2	-0.4	-1.4	1.7	-0.1	-0.8
MMP11	0.8	1.3	-0.2	0.1	0.1	-0.3		GRRP1	0.0	-0.3	0.0	0.6	0.1	0.2
NID1	-2.6	<u>-6.3</u>	<u>-5.2</u>	<u>-3.6</u>	-2.5	<u>-3.6</u>		stard9	-0.7	0.5	0.1	0.0	0.8	-0.9
THY1	<u>-11.3</u>	<u>-9.4</u>	<u>-12.7</u>	<u>-3.0</u>	-8.0	-5.8		RAMP2	<u>-4.8</u>	-5.8	<u>-4.4</u>	<u>-5.9</u>	-0.6	-5.0
CST4	0.8	1.3	-0.1	0.4	0.8	0.3		Rasip1	3.1	-1.2	-1.7	-1.1	-0.3	-0.5
MRC2	1.6	0.7	-0.7	-0.6	0.6	-0.5	25	Robo4	0.3	1.2	-0.3	0.3	0.0	0.2
TNS1 BMP1	0.6 0.5	0.0 0.9	-0.9 -0.4	-0.3 -0.6	-0.3 0.4	-0.5 -0.4	23	Dup.	-0.1	1.6	0.0	0.9	-4.9	0.8
COMT	-0.7	-1.5	-1.0	-1.7	-0.2	-0.7		Slc43a3	-0.8	1.8	0.0	0.2	1.0	0.6
PTPRCAP	0.4	0.0	0.2	0.9	0.1	-0.5		Slc9a3r2	-0.5	-1.9 -0.6	$\frac{-2.6}{2.0}$	-0.8	$\frac{-2.4}{5.2}$	-4.4
57722	0.2	0.1	-0.9	-0.1	0.0	-0.2		Slco2a1 B2M	$\frac{-2.5}{-0.9}$	0.3	-2.9 -0.8	-2.4 0.8	$\frac{-5.3}{0.6}$	-1.0 -0.8
EXTL3	1.0	0.3	0.0	0.4	0.8	-0.5		HPRT1	2.0	-0.2	0.4	0.8	0.4	0.1
Vwf	-1.8	-3.5	<u>-3.7</u>	<u>-5.4</u>	-3.3	-2.6	30	RPL13A	0.4	1.3	0.4	0.0	1.2	0.6
PNMT	0.7	1.1	-0.4	-0.1	0.1	-0.7		GADPH	-1.6	-2.0	-0.5	-2.1	-0.2	0.4
58488	1.2	1.5	0.3	0.4	1.0	0.2		ACTB	-1.6	-0.1	-0.2	0.4	-0.6	-0.1
itbp4	-0.8	-1.9	-2.5	-1.7	0.1	-1.5		петь	1.0	0.1	0.2	0.1	0.0	0.1
23001 4247	0.4 1.0	-0.5 0.3	-1.0 -0.1	0.3 0.2	-0.8 0.5	0.1 -0.3		Log2 fold-change	of gene expre	ession. Fold-	changes wi	th P ≤ 0.001	are underli	ned.
4247 Sdc4	2.2	0.3	0.2	4.0	0.3	1.4		0			Ü			
ralb	0.1	0.3	-0.7	0.7	-0.4	-0.5	35	Clustering A	nolveje c	of Gana	Evnrace	ion Date	0	
DGKG	5.4	2.0	3.4	6.1	2.9	1.8		Clustering A	mary sis C	of Gelle	Express	ion Dau	а	
TRA2B	1.5	-1.6	-0.2	0.6	-0.6	0.9		It is well k	nown tha	at tumor	s becom	ne resista	ant to an	tiangio-
CLIC1	-0.1	0.9	0.0	1.8	6.6	0.6		genic therapy	u (Berne	re and E	Ianahan	Natura	Raviou	s Can
90780	-1.2	-1.9	-1.4	-2.4	0.1	-0.8			_					
5569	-3.0	0.8	-0.1	<u>4.6</u>	1.5	0.1	40	cer, 8:592-60	03, 2008)	). Tumor	angiog	enesis in	ivolves i	nultiple
151516	1.2	1.1	0.0	0.5	0.7	0.3	40	pathways. C	hirrent a	intiangio	ogenic (	drugs (s	such as	AVAS-
CALD1	1.7	2.3	1.1	-0.6	0.6	1.6				-	-			
DUT	-0.8	-1.8	-0.2	-1.9	-0.4	-1.2		TIN®) succe	essfully 1	nhibit oi	ne pathy	vay and	are follo	owed by
copa PDCD2	0.4 0.5	0.1 -0.4	0.0 -0.9	-2.1	0.2 0.2	-0.5 -1.1		activation of	alternat	ive path	wavs w	hich res	sume the	e angio-
151516	0.9	1.3	0.0	$\frac{-1.7}{0.5}$	0.7	0.3				_				_
VGLL4	-1.3	<u>-3.5</u>	-3.5	1.3	-0.8	-2.8	45	genesis proc						
APOE	3.3	0.8	-1.0	$\frac{1.5}{0.8}$	-2.2	5.1		that inhibits	multiple	angiog	enesis p	athway	s is expe	ected to
8131	0.6	0.1	-0.5	-0.2	0.1	0.3		more success	_		_		•	
10988	2.5	1.2	0.8	0.3	1.0	0.9		more success	siuny av	oid di ug	, resista	nce.		
9569	-2.3	-2.2	-4.2	-1.7	0.2	-2.0		To that en	d. cluste	ering an	alvsis v	vas nerf	ormed v	vith the
B2M	-1.4	-0.2	-0.7	0.5	0.0	-0.4		gene express						
HPRT1	0.2	-0.6	1.1	0.8	0.2	0.4	50							
RPL13A	1.0	0.9	0.6	0.0	0.3	1.1		genesis, and						
GADPH	0.1	-0.7	-0.5	-1.7	-0.1	-0.3		ent sets of g	enes and	therefo	re diffe	rent ang	giogenes	ıs path-
ACTB Acvel1	-0.9 -0.6	-0.5 -1.3	-0.5 -1.2	-2.2 -1.0	-0.9 0.0	-0.9 -1.6		ways.						
Acvrl1 Adcy4	0.0	-1.3 -0.4	-1.2 -0.5	$\frac{-1.9}{-0.6}$	-0.4	4.3		•	ona af 1	maga1- S	ob eff	t dictor	taara	to in 41.
Calcrl	-4.3	-4.0	-5.4	-0.0 -2.9	-1.1	<u>-4.3</u>		Combinat						
Caskin2	<u>-2.8</u>	$\frac{-4.0}{-2.3}$	<u>-2.7</u>	<u>-2.3</u>	-6.7	<u>-2.3</u>	55	clustering ar						
Ccbp2	$\frac{-0.1}{-0.1}$	1.4	0.4	5.6	0.4	0.0		genesis path	ways and	d therefo	ore be n	ore effi	cient an	tiangio-
Cldn5	0.6	0.0	0.1	0.4	-0.1	-0.6		genic regime						
1839	-1.2	1.0	0.9	-4.2	-0.1	-0.3		from this of						

-2.3

-0.7

-5.6

1.5

-3.9

 $\frac{-1.6}{-0.8}$ 

<u>-5.5</u>

-10.2

2.8

-0.1

-1.2

-1.4

-5.5

-1.7

3.7

-1.1

-0.8

-4.4

-2.2

0.5

-0.3

 $\frac{-3.3}{-1.0}$ 

 $\frac{-8.3}{0.3}$ 

-6.4

-2.0

-1.0

 $\frac{-3.1}{-3.3}$  0.5

150117.

0.9

-0.6

<u>-8.9</u>

0.4

-3.2 -2.6 -1.2 <u>-3.1</u>

-3.5

-2.6

-0.8

-0.3

0.9

<u>2.4</u> -2.9

-1.5

<u>-2.3</u>

-3.4

-1.2

 $\frac{-3.8}{-1.1}$  -4.9

1.8

-1.6

 $\frac{-3.3}{-1.6}$ 

<u>-1.9</u>

<u>-4.6</u>

Egf17

Ehd4

Entpd1

Epas1

ESAM1

Grp116

Hspa12b

Icam1

Erg

Fgd5

e sets in the 55 clustering analysis could potentially target different angiogenesis pathways and therefore be more efficient antiangiogenic regimens. Several potential drug combinations emerge from this clustering analysis, such as NSC 259969+NSC

60 In view of the many possible embodiments to which the principles of our invention may be applied, it should be recognized that the illustrated embodiments are only examples and should not be taken as a limitation on the scope of the invention. Rather, the scope of the invention is defined by the following claims. We therefore claim as our invention all that comes within the scope and spirit of these claims.

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The invention claimed is:

- 1. A method of inhibiting endothelial cell tube formation in a subject, comprising administering to the subject an effective amount of a composition comprising 2-benzylidene-3-(cyclohexylamino)-3H-inden-1-one chloride (NSC 150117), or 5 a pharmaceutically acceptable salt thereof, thereby inhibiting endothelial cell tube formation in the subject.
- 2. The method of claim 1, wherein the composition further comprises [4-[(4-arsonophenyl)methyl]phenyl]arsonic acid (NSC 48300), or a pharmaceutically-acceptable salt thereof. 10
- 3. The method of claim 1, wherein the composition is administered topically, intravenously, orally, parenterally, or as an implant.
- **4**. The method of claim **1**, further comprising administering to the subject an inhibitor of bFGF, FGF, or VEGF.

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